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ABSTRACT

Intended to aid networking efforts among mental retardation professionals, parents, and persons with retardation, the directory lists international organizations and provides individual country reports on mental retardation efforts and organizations. Part I, international organizations, lists the United Nations and 5 of its specialized agencies, 3 inter-governmental (regional) organizations, 2 international coordinating agencies, and 25 international non-governmental organizations. Address, founding date, and a description are provided for each organization. The individual reports of 71 nations comprise most of the document. The following is presented for each nation: a brief description of the nation and its educational system; a listing of government agencies with mental retardation responsibility; information about voluntary organizations, research organizations, and publications; brief descriptive notes on programs and services; dates of school holiday periods; and sources of other information. (DB)

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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International Directory of Mental Retardation Resources

EC222703

Third Edition 1989

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INTERNATIONAL DIRECTORY
OF
MENTAL RETARDATION RESOURCES

Edited by

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First Edition 1971
Revised 1977-78
Third Edition 1986-89

U.S. DEPARTMENT OF HEALTH
AND HUMAN SERVICES
President's Committee
on Mental Retardation
Washington, D.C. 20201

INTERNATIONAL LEAGUE OF
SOCIETIES FOR PERSONS
WITH MENTAL HANDICAP
Avenue Louise 248, Box 17
B-1050 Brussels, Belgium

The third edition of the International Directory of Mental Retardation Resources was supported in part by the National Institute of Disability Rehabilitation Research (NIDRR), Office of Special Education and Rehabilitative Service, U.S. Department of Education.

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PREFACE

The President's Committee on Mental Retardation (PCMR) is delighted to publish the third edition of the International Directory of Mental Retardation Resources.

PCMR would like to express its deep gratitude to Rosemary F. Dybwad, Ph.D., the author, for her dedication in compiling and editing this extensive document. We also thank all of the countries that have provided the information necessary to make publication of this magnitude a reality. As in case of the two previous editions of the International Directory, we anticipate that there will be a great demand throughout the world for the third edition.

The International Directory has been a valuable resource guide for citizens with mental retardation, their parents, and professional practitioners, researchers and students specializing in the area of mental retardation and other disabilities throughout the world. This Directory will assist organizations and agencies involved in mental retardation to communicate with each other in order to share their knowledge and research findings.

Albert L. Anderson, D.D.S.
Vice Chairperson
President's Committee on
Mental Retardation

INTRODUCTION

The third edition of the International Directory of Mental Retardation Resources is a welcomed publication. This new edition indicates the continued growth and development that is taking place in all countries. It further proves the statement "It's a small world after all," since we now recognize that we can travel and communicate with our fellow advocates and colleagues who share in the interest of building a better society for people with mental retardation.

Rosemary F. Dybwad, Ph.D., has for several decades provided consumer representatives, professional workers and public officials with resource information on existing programs in countries throughout the world. WIth her remarkable knowledge of international relations, she has networked with national leaders who have contributed to the development of this directory.

The detailed preparation of this current edition will provide a valuable guide to anyone who plans to communicate or travel to any country that shares in our common concern. Certainly the International League of Societies for Persons with Mental Handicap (ILSMH) welcomes this latest edition. The ILSMH membership will fully utilize the content of the directory and will guide fellow colleagues and governmental officials to examine the content in order to improve in the planning of future services.

The President's Committee on Mental Retardation has again contributed to advancing a better understanding of international developments and resources. The ILSMH appreciates the opportunity to contribute and utilize this International Directory for the exchange of valuable information.

Eloisa García de Lorenzo
President
International League of Societies
for Persons with Mental Handicap

FOREWORD

Even before intercontinental travel became so common, when mail crossed the oceans only by ship, and tele media were unknown, networking was nevertheless effective among those in the western world who shared a common interest in understanding mental retardation and the needs of people who appeared to be affected by it. For some of those reaching out, the interest began with scientific curiosity leading to a concern for the people and what could be done for them; for others the reverse sequence occurred, - efforts to care for and train people with retardation led to fundamental questions, both religious and scientific: why?, how?, what works?

During the 19th and early 20th century, pioneers from many European countries, - Germany, Switzerland, France, England and later Italy - visited one another and some also came to North America or were visited by Americans. The work of Binet in France was translated into English and standardized on American children. The work of Dr. Langdon Down received multinational attention. A Frenchman, Edouard Seguin, founded (in 1876) what is now the American Association on Mental Retardation, the largest national multidisciplinary professional organization in the world. Interpersonal contact was made less casual with the introduction of annual meetings among the professional groups including a growing cadre of psychologists. Even so, communication remained the responsibility of a relatively close knit group most of whose national and international members knew each other personally.

The first 50 years of this professional camaraderie saw many advances and changes in knowledge, opinions, and attitudes concerning the field. More people joined the ranks but the means of communication did not radically change until after World War II.

Clearly international communication and cooperation were severely constrained during the Great Depression and World War II - a period of 15 years - almost a generation. When resumed in the post war era, it was of a different order, qualitatively and quantitatively. A number of factors contributed synergistically to these dramatic changes. Among those factors were:

- Commercial aviation on transoceanic routes making it possible for more people to travel to more places more frequently;
- Telecommunications of all kinds with enhancement of the written and spoken word by new visual and audio media, especially those not dependent on knowledge of a specific language;
- Burgeoning interest in mental retardation in oriental and in developing countries, especially in Asia and South America, later in Africa;
- Rapid growth in the number of people engaged as professionals and paraprofessionals in the field world wide;
- The advent of national organizations of parents and the creation of an international league of such organizations;
- The creation of the International Association for the Scientific Study of Mental Deficiency;
- The sustained work of Gunnar and Rosemary Dybwad in the international area.

This third edition of the international directory of services for people with mental handicaps should be viewed as a 30th anniversary commemorative of Dr. Rosemary Dybwad's initial activities specific to creating and sustaining international networking on a person to person basis. It was in the late 50's that she undertook as a volunteer to maintain the international correspondence that cleared through the New York offices of what is now the Association for Retarded Citizens of the United States, and to organize the fragmentary information on which that correspondence was based. In 1964 her center of operations was moved to Geneva where she and Gunnar were able to work full time on international issues under the aegis of the International Union for Child Welfare. From this global vantage point they were able to travel worldwide to visit in person many of those known to them until that time only by mail. On their return to the United States in 1967, Gunnar's faculty appointment at the Heller School of Brandeis University carried with it a continuing opportunity for Rosemary to document, enhance, and promote concurrent efforts in dozens of countries to improve the conditions of life for people with mental handicaps. Here she continued to serve as a one person information and referral service for prospective international travelers.

Robert Oppenheimer was once asked by a Congressional committee what he considered the best way to transmit scientific information; his reply was "Wrap it up in a person". This advice is even more apt where what is to be communicated is not confined to scientific knowledge but includes an ambience and a cultural adaptation, especially if the communicator is more of a doer than a wordsmith, and the recipient of the communication is a visionary.

As we approach the 21st century, with its promise of even more in the way of technological advances, we nevertheless recognize the continuing importance of enhancing the possibilities for on-site person to person contact not only among scientists but particularly among those whose own knowledge is based on personal experience. Among the seekers are parents and siblings as well as direct service workers and first line administrators. Where to go and whom to visit? It is these questions that Rosemary Dybwad's directory is designed to answer. In a rapidly changing field the answers change frequently and Rosemary has been tireless in renewing her information base. Thus we welcome warmly the latest edition of a unique informational resource that the U.S. President's Committee on Mental Retardation has had the honer to publish and disseminate worldwide.

Elizabeth M. Boggs
Hampton, NY
December 1, 1988

ACKNOWLEDGEMENTS

This volume is the product of collaborative efforts of countless people around the world, volunteers, professional workers, state officials, and last but not least, the international public servants in the United Nations and its Specialized Agencies.

As much as possible the Directory has tried to follow a uniform outline. However, the wide range of level of development from country to country made this very problematical. For the same reason no attempt has been made to tabulate information, and indeed, the editor advises against such attempts. While much care has been taken to clarify the use of terminology, there is no question but that respondents have used the same terms with wide variation in meaning.

Countries where the medical influence is predominant tend to continue to use the older terminology; other countries have changed to less stigmatizing terms. In translating from another language, a comparable English term was found when possible; mental retardation and mental handicap have been used fairly interchangeably, connotations notwithstanding.

Unfortunately, for this edition the editor encountered more problems than before in securing adequate responses, in spite of repeated requests, and thus some countries could not be listed. But some new countries have been added,and it is obvious that the cross currents of information sharing are running strongly and in many directions.

The editor sincerely hopes that new computer techniques may eventually facilitate an effective information gathering and updating process from nation across the world. Sponsorship of such a project should be a challenge to the international community. In the meantime, attention is called to the Directory of Special Education prepared and published by the Special Education Section of UNESCO in 1987. It contains data on the provision of special education by governmental and non-governmental agencies in 136 countries and territories,and in its 100 pages provides a wealth of brief, factual information in French, English or Spanish.

The editor wishes to express her appreciation and indebtedness to each person who responded to the request for updating and new information. Special thanks must be extended to Dr. Eloisa de Lorenzo of Uruguay, to Professor Peter Mittler and Stephen Dowson of England, Rannveig Traustadóttir of Iceland, Ron and Jane Brouillette in Nepal, Father Adam Gudalevsky of Interaíd, Lena Saleh at UNESCO, Barbara Duncan of Rehabilitation International, Alice Wells, Barbara Milliaris, Fred Krause and Patricia McGill Smith of the USA.

Especially warm appreciation is due Paule-J. Renoir, Administrative Director of the ILSMH, and to Gladys Rivera de Rodríguez for her infinite patience in processing the manuscript. Finally, most sincere thanks go to the Nathan and Toby Starr Center on Mental Retardation at the Florence Heller Graduate School for Advanced Studies in Social Welfare, Brandeis University, which has so generously provided housing and supporting services for the Directory project.

Rosemary F. Dybwad

PART I

INTERNATIONAL ORGANIZATIONS

A. THE UNITED NATIONS AND ITS SPECIALIZED AGENCIES

Mental retardation is a worldwide problem and, as the information in this Directory will indicate, is a reality even in the so-called developing countries once they reach a certain level of social organization. In 1970, at the initiative of the French delegation, the Social Development Commission of the United Nations Economic and Social Council took time to consider the "Declaration of General and Special Rights of the Mentally Retarded" as promulgated in 1968 by the International League of Societies for the Mentally Handicapped. Under the title Declaration on the Rights of Mentally Retarded Persons, this affirmation was adopted, without a negative vote, by the General Assembly of the United Nations on December 20, 1971.

Overall, concern with mental retardation is part of the United Nations' concern with disability. Several of the specialized agencies making up the United Nations family are engaged in one or more aspects of rehabilitation. The United Nations, through the Social Development Centre of the Economic and Social Council, is especially concerned with the legislative, administrative, psychological, prosthetic and social services aspect of rehabilitation; the International Labour Organization in the vocational aspects of rehabilitation and with matters relating to the prevention of industrial accidents and occupational diseases, as well as social security; the World Health Organization in the prevention of disease and disability as well as in the medical aspects of rehabilitation; UNESCO in special education for children with handicaps; and UNICEF in projects of direct assistance to child and maternal health services where these have a bearing on the welfare of disabled children.

On December 9, 1975 the UN General Assembly adopted the Declaration on the Rights of Disabled Persons, and in its 31st Session, in 1976 proclaimed 1981 as the International Year of Disabled Persons (IYDP). During that year the need for a world wide increase of attention to the concerns of people with disabilities was established so convincingly that the General Assembly in December 1982 declared 1983-1992 the United Nations Decade of Disabled Persons.

UNITED NATIONS ECONOMIC AND SOCIAL COUNCIL (ECOSOC)

United Nations Plaza
New York, NY 10017
Founded 24 October 1945

As a principal organ of the United Nations, ECOSOC, under the authority of the General Assembly, not only coordinates the economic and social welfare activities of the United Nations Organization, but also carries out the liaison with the UN Specialized Agencies, since 1978 in the offices in Vienna:

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DEPARTMENT OF INTERNATIONAL ECONOMIC AND SOCIAL AFFAIRS (DIESA)
CENTRE FOR SOCIAL DEVELOPMENT AND HUMANITARIAN AFFAIRS (CSDHA)
SOCIAL DEVELOPMENT DIVISION, DISABLED PERSONS UNIT

P.O. Box 500
1400 Vienna, Austria

The Centre for Social Development and Humanitarian Affairs is concerned with the social, legislative, administrative and psychological aspects of disability prevention and rehabilitation in pursuit of the World Programme for Action concerning disabled persons adopted by the General Assembly in 1982. The Centre promotes the concepts of full participation and equalization of opportunities for disabled persons.

Within the Centre, the Disabled Persons Unit coordinates the World Programme of Action and administers the voluntary fund for projects in the field of disability.

The Center also organizes the regular UN Interagency Meetings, in which representatives of the relevant UN agencies meet to discuss and coordinate their work in the field of disability. Participating also are representatives of the International Council on Disability (ICOD). (see below)

UNITED NATIONS CHILDREN'S FUND
(UNICEF)
3 UN Plaza
New York, NY

An organ of the UN (not a Specialized Agency) founded December 1946 by Resolution of the General Assembly to assist governments in programs for the improvement of child health and welfare.

UNICEF has provided essential supplies and equipment to help governments establish or strengthen programs for the treatment and rehabilitation of handicapped children. Emphasis is on the laying of a sound basis for comprehensive and continuous services. Specialized help to handicapped children is given where such services are part of the basic framework and organization of maternal and children's service in a community. UNICEF Programme Guidelines, volume 8, published in 1987 (CF/MN/G/08) deals comprehensively with childhood disability, prevention and rehabilitation.

INTERNATIONAL LABOUR ORGANIZATION (ILO)

Avenue Appia
1211 Geneva 22, Switzerland

Vocational Rehabilitation Branch
Training Department

Established in 1919, in 1946 it became the first Specialized Agency associated with the United Nations

The stated purposed of the ILO is to improve working and living conditions throughout the world and thus contribute to universal and lasting peace and social justice.

In the rehabilitation field the main activities of the ILO include:
-establishment of international standards on vocational rehabilitation;
-provision of technical cooperation by means of consultant missions, fellowships, and equipment;
-seminars, study groups and training courses;
-research, publications and audio-visual materials.

In the general field of rehabilitation the ILO is especially concerned with matters relating to industrial accidents and occupational diseases, protection of young workers, vocational guidance, vocational training, placement and conditions of work in open and sheltered employment, and social security.

A keystone in ILO's work in rehabilitation was Recommendation 99, adopted in 1955 by the International Labour Conference; it constitutes the magna carta of rehabilitation and specifically covers mental as well as physical disability, including special provisions for disabled children and young persons.

In 1983 ILO adopted Convention 159 concerning Vocational Rehabilitation and Employment of Disabled Persons. In contrast to Recommendations and Declarations a Convention is binding on those countries which sign it. In the meantime it serves as significant programmatic statement.

UNITED NATIONS EDUCATIONAL, SCIENTIFIC AND CULTURAL ORGANIZATION (UNESCO)

Established as a Specialized Agency related to the UN on November 4, 1946

7, place de Fontenoy
75700 Paris, France

Special Education Section

UNESCO has an unusually wide ranging program. According to its constitution UNESCO's purpose is to contribute to peace and security by promoting collaboration among the nations through education, science, and culture in order to further universal respect for justice, for the rule of law, and for the human rights and fundamental freedoms which are affirmed for the peoples of the world, without distinction of race, sex, language, or religion, by the Charter of the United Nations.

It was not until 1968, twenty two years after its founding, that UNESCO began an operating program with a full time professional staff person assigned to the area of special education. Once established, the Special Education Section has been very productive, both in terms of publications, conferences and seminars, and in providing fellowships, materials and consultation to its Member States.

A conference on Action and Strategy for Education, Prevention and Integration held in 1981 (IYDP) resulted in a most important statement of international philosophy and policy. In memory of Nils Ivar Sundberg, Director of UNESCO's special education program until his sudden death during this meeting, it is known as the Sundberg Declaration.

A new Directory of Special Education issued in 1985 in English, French and Spanish, provides data on 136 countries.

WORLD HEALTH ORGANIZATION

Avenue Appia
1211 Geneva 22, Switzerland

Established as a Specialized Agency of the United Nations on April 7, 1948.

The objective of the WHO is the attainment by all people of the highest possible level of health, defined as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

Although the maternal and child health and the genetics programs of WHO have special relevance for the field of mental retardation, the Mental Health Unit was the first to become actively involved and has remained concerned. The work of two Expert Committees resulted in publications which have become basic worldwide references: The Mentally Subnormal Child (1954), and Organization of Services for the Mentally Retarded, (1968). They have been followed by a more recent publication, Mental Retardation: Meeting the Challenge (1985).

Of great significance, particularly for developing countries, has been WHO's work and publications in the field of Community Based Rehabilitation (CBR), especially the manual on Training Disabled People in the Community, widely field tested for practical use.

B. INTER-GOVERNMENTAL (REGIONAL) AGENCIES

[It should be noted that much important work of the United Nations and the Specialized Agencies is carried out through their respective regional offices throughout the world. They are a significant part of the international human services network.]

INSTITUTO INTERAMERICANO DEL NIÑO (IIN)
INTER-AMERICAN CHILDREN'S INSTITUTE (IACI)

Avenida 8 de Octubre 2904
Montevideo, Uruguay

Founded in 1927

Sección Pre-escolar y Educación Especial
Preschool and Special Education Section

In 1949, the Inter-American Children's Institute became an official agency of the Organization of American States (OAS) which has its headquarters in Washington, D.C. (The other specialized organ of OAS is its Inter-American Committee of Women.) In 1965, following the first Inter-American Workshop (Seminario) on Mental Retardation, in San Juan, Puerto Rico, the OAS established the Mental Retardation Section within IACI. This was the first such inter-governmental bureau specifically devoted to mental retardation; later its function was widened to include the whole range of special education. IACI arranges for regional inter-country seminars and conferences, provides consultation throughout the hemisphere, and issues a bilingual bulletin and special publications, original and in translation, on many different aspects of the field.

THE EUROPEAN COMMUNITIES

Commission of the European Communities (CEC)

Rue de la Loi 200
1049 Bruxelles, Belgium

Established in 1951

Originally created in 1951 to promote closer economic collaboration among the six founding countries (the number has since doubled), this inter-governmental body has extended its activities (conferences, seminars, studies and publications) into the areas of health, education and rehabilitation.

This was initiated when, in 1975, the Directorate-General for Social Affairs undertook a major comparative study on the rehabilitation of handicapped persons in the countries of the Rome Community. There followed in 1978 a ministerial conference in Rome on special education in nine countries of the Community, with findings published by the Commission, and in 1981 a major position paper entitled Problems of the Handicapped was prepared by the Economic and Social Committee. There has been increasingly active interaction between the Community's Bureau of Action in Favour of Disabled People and the non-governmental disability organizations in the Community member countries; the formation of European associations is strongly promoted.

ORGANIZATION FOR ECONOMIC CO-OPERATION AND DEVELOPMENT (OECD)

Centre for Educational Research and Innovation (CERI)

2, rue André-Pascal
75775 Paris CEDEX 16
France

Established in 1960

OECD is a unique inter-governmental body, neither world-wide nor regional, comprising twenty two countries, from Europe and North America plus Australia, New Zealand and Japan. Its goal is the promotion of economic growth, employment and improved standards of living.

The Centre for Educational Research and Innovation carries out research and advanced experiments testing innovations in education, including special education. It has pioneered in comparative studies of school integration and of independent living.

C. INTERNATIONAL COORDINATING AGENCIES

UN INTERAGENCY MEETING ON THE DECADE OF DISABLED PERSONS

Center for Social Development and Humanitarian Affairs (CSDHA)
Social Development Division
Disabled Persons Unit
P.O. Box 500
1400 Vienna, Austria

Established 1950

Acting pursuant to a resolution of the Economic and Social Council calling for a well-coordinated international program for rehabilitation of physically handicapped people, the UN Administrative Committee on Coordination arranged for a meeting of the appropriate technical officials of the United Nations and the Specialized Agencies concerned. Thus, on December 18, 1950 the Ad hoc Interagency Meeting on Rehabilitation of the Disabled came together for the first time and has convened annually ever since. It is now known as the Interagency Meeting on the UN Decade of Disabled Persons. Represented are the Social Development Division (Disabled Persons Unit) of CSDHA, ILO, WHO, UNESCO, UNICEF, the UN High Commissioner for Refugees, and the International Social Security Association.

The activities of this group have been very successful in focusing on the expanding needs of rehabilitation of persons with mental as well as physical handicaps. Invited representatives from ICOD, the International Council on Disability, are in attendance at the Interagency Meetings, thus facilitating coordination and cooperation with the non-governmental organizations.

INTERNATIONAL COUNCIL ON DISABILITY (ICOD)

c/o Rehabilitation International
25 East 21st Street
New York, NY 10010 USA

Established 1953

The International Council on Disability is the new name (1986) of the former Council of Organizations Interested in the Handicapped (CWOIH).

It was established in 1953 after non-governmental organizations active in the rehabilitation field had met, at the initiative of the United Nations, in line with a 1950 resolution of the Economic and Social Council (ECOSOC) calling for cooperation between the UN and the non-governmental rehabilitation agencies.

Membership in the Council is open to any non-governmental organization which has been accorded an official relationship with ECOSOC, ILO, WHO, UNESCO or UNICEF. The purpose of the Council is to assist the UN and Specialized Agencies and to enlist their cooperation in developing a well coordinated international program for rehabilitation of handicapped people; to serve as a liaison body in pursuit of these efforts; and to develop cooperation and methods of common action between the non-governmental organizations themselves.

Other international organizations which have a direct interest in the welfare of disabled people may be granted associate membership in the Council, subject to approval by the Executive Committee of the Council. The International League of Societies for Persons with Mental Handicaps has held several three year terms of membership on the Executive Committee of ICOD. In 1986, ICOD had 46 member organization and a dozen associate members. Rehabilitation International provides Secretariat services for ICOD, and in 1987, published for the Council the ICOD Compendium. Facts about the members of the International Council on Disability and related agencies of the United Nations System.

Of crucial importance is the participation of representatives of the Council in the planning and coordinating action of the annual UN Interagency Meeting on the Decade of Disabled Persons.

D. INTERNATIONAL NON-GOVERNMENTAL ORGANIZATIONS (NGOs)*

1. Concerned primarily with mental retardation

INTERNATIONAL LEAGUE OF SOCIETIES FOR PERSONS
WITH MENTAL HANDICAP (ILSMH)
Avenue Louise 248, Box 17
1050 Brussels, Belgium   Founded 1960/62

The International League of Societies for the Mentally Handicapped was established in 1962 as successor to the European League founded in 1960, by representatives of parents' organizations, professional groups and by individuals committed to advance the interests of persons with intellectual disabilities.

Through creation of a common bond of understanding between parents and others interested in retarded persons, the League hopes to secure on their behalf from all possible sources the provision of efficient remedial, residential, educational, training, employment and welfare services. Main goals are:

-To develop policies on the various aspects of mental retardation, arising from the solidarity and collaboration between persons with mental handicaps, their families, friends and professional workers, making it possible for them to be part of ordinary society;

-To make known these policies; to disseminate information as widely as possible, and, when necessary, act as a pressure group;

-To initiate and maintain contacts with international organizations, as spokesman for its member societies;

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* The majority of these NGOs are accredited to the United Nations or one of its Specialized Agencies and are members of ICOD.

- To stimulate the creation of new associations and assist developing associations; to keep all member societies informed and promote contacts between them in order to facilitate their work on behalf of persons with intellectual disabilities in their own countries, in response to local needs.

The League's name was changed in 1978 to emphasize its commitment to the individual human, social and legal rights of the persons it represents. In 1988 ILSMH had a membership of nearly 120 associations, with national societies in 51 countries, affiliates in 40 countries and 4 regional associate member federations. Congresses are held every 4 years, general assemblies at 2 year intervals, with symposia and working groups. Multilingual publications are available and a newsletter is issued in French, English, German and Spanish.

ILSMH is accredited to the UN, UNESCO, ILO and through the Joint Commission (see below) to WHO. It maintains contacts with other NGOs through ICOD.

INTERNATIONAL ASSOCIATION FOR THE SCIENTIFIC STUDY OF MENTAL DEFICIENCY (IASSMD)

Founded 1964

Dr. Michael Mulcahy, President 1988-1992
The Medico-Social Research Board
73 Lower Baggot Street
Dublin 2, Ireland

Dr. Terry Dolan, President-Elect
University of Wisconsin
Waisman Center
1500 Highland Avenue
Madison, Wisconsin 53705, USA

The purpose of the IASSMD is to promote the scientific study of mental deficiency through a multidisciplinary approach by serving as a medium for exchange of knowledge and experience;

-to disseminate information through organization of congresses and other meetings;

-to encourage research including causation, prevention, diagnosis and evaluation, therapy, management, education and social habilitation;

-to encourage the creation of multidisciplinary scientific organizations on a national level.

International congresses have been held every three years; in future they will be at four year intervals; the next will be hosted by the Australian Society for the Study of Intellectual Disability (ASSID) in 1992.

The published Proceedings of the congresses have constituted a significant record of world-wide developments in research and services.

JOINT COMMISSION ON INTERNATIONAL ASPECTS OF MENTAL RETARDATION
Avenue Louise 248, Box 17
1050 Brussels, Belgium Established 1969

In compliance with WHO policy relating to representation of NGOs, the Joint Commission on International Aspects of Mental Retardation was formed by ILSMH and IASSMD and accorded consultation status by WHO in 1969. Chairmanship rotates biennially between the two organizations. The Joint Commission has prepared policy papers for WHO, most recently Mental Retardation: Meeting the Challenge (WHO-1985). Individuals from both organization have served WHO as expert consultants.

2. Other non-governmental organizations (NGOs) or foundations which include mental retardation in their programs (listed alphabetically).

L'ARCHE COMMUNITIES

Trosly-Breuil
60350 Cuise-la-Motte
France Founded 1964

Founder and President: Jean Vanier

L'Arche is an international federation of communities in which handicapped people and those who help them live, work and share their lives together. It started in 1964 in Trosly in Northern France and there are now some 80 communities in France, Britain, Ireland, Denmark, Belgium, Spain, Canada, USA, India, Haiti, Honduras, Ivory Coast, Burkina Faso, Italy, Switzerland, Australia, Dominican Republic, Mexico, Brazil, West Germany and the West Bank. From the Charter of the Communities: "We believe that each person, whether handicapped or not, has a unique and mysterious value. The handicapped person is a complete human being and as such he has a right to life, to care, to education and to work."

Letters of L'Arche, issued four times a year, and other information is published at Daybreak: 11339 Yonge Street, Richond Hill, Ontario L4C 4X7, Canada

BOY SCOUTS WORLD BUREAU

Case postale 78
1211 Geneva 4, Switzerland Founded 1920

Scouting for the handicapped, now active in more than 50 countries, has become a very important program not only for the benefits to its active participants but for its impact on young people in general and on the community. Integration is a main concern of the Extension Scouting Service; the bulletin Together specializes in extending Scouting to persons with disabilities.

BUREAU INTERNATIONAL CATHOLIQUE DE L'ENFANCE (BICE)
International Catholic Child Bureau (ICCB)

M.E.P.S. Special Care Commission
40, rue la Fontaine
75016 Paris, France

Founded 1947

Through its Medico-Educational and Psycho-Social Special Care Commission, this organization has consistently included in its program concern for mentally retarded children and young people. The Commission has organized numerous study groups on such subjects as special education, vocational rehabilitation, leisure time, social, religious and affective development; these meetings and their documentation have provided significant opportunities for international exchange. In 1988 a new information bulletin with news of the M.E.P.S. Special Care Commission was added to ICCB's journal Children Worldwide to increase the channels of communication about studies of programs to promote spiritual growth for children with handicaps.

THE CAMPHILL MOVEMENT

Camphill Village Trust, Ltd.
Delrow House, Aldenham
Watford, Herts., WD2 8DJ
England

Camphill Association of
North America
Copake, New York 12516
USA

Founder Dr. Karl König

Founded 1940

The Camphill Movement grew out of the Camphill/Rudolf Steiner Schools established in 1940 near Aberdeen, Scotland, by the late Dr. Karl Konig, based on the Anthroposophic principles of Rudolf Steiner, the German philosopher and educator. Village communities followed, and the movement spread to other countries in Europe, South Africa, and North America, counting now over 50 residential "social therapy" schools and self-contained villages. People live together in family homes where the growth of mutual interdependence is encouraged; neither the handicapped nor the non-handicapped members of the village community receive a salary, but share cooperatively.

THE LEONARD CHESHIRE FOUNDATION

26-29 Maunsel Street
London SW1P 2 QN
England

Founded 1948

The purpose of the Foundation is "to provide non-institutional residential and other accommodation for the care, nursing, general well-being and where possible, rehabilitation of men, women and children, regardless of race or creed, who are chronically ill, permanently disabled or who have a mental handicap or mental illness, especially in all cases for those with limited means." The Foundation's International Council consists of members from Foundations in 38 countries. Cheshire Homes are entirely autonomous under the supervision of their respective Regional Secretariats. In 1980, there were 75 in the U.K., 115 in other countries.

DISABLED PEOPLES INTERNATIONAL (DPI)

Reimersholmsgatan 9 (visitors address)
Box 36033 (mailing address)
S-10071 Stockholm
Sweden
Founded 1981

At the 14th World Congress of Rehabilitation International in Winnipeg, Canada in 1980, various national groups of people with disabilities began to plan for their own organization. It was formally constituted the next year at the founding conference in Singapore. The basic goal of DPI, now active in 70 counties, is to work for equality of opportunities and full participation in all areas of life for people with disabilities. Five regional vice-presidents have been appointed for Africa, Asia and the Pacific, Europe, Latin-America, North America and the Caribbean. DPI's third world congress is to be held in Bogotá, Colombia in November 1989, on Physical and Attitudinal Barriers. The journal Vox Nostra appears in English, French and Spanish.

DPI is accredited to ECOSOC, UNESCO and ILO. DPI with others was influential in the passage by the United Nations General Assembly in December 1988 of a strong resolution on disability issues and in particular on the World Program of Action of the United Nations Decade of Disabled People, new at mid-term (1983-1992).

NOTE: While self-advocacy groups of persons with mental retardation (frequently known as "People First" associations) are organized in quite a number of countries and a second international conference was held in 1988 in England, they have not established a formal international organization. Since 1978, many have participated in ILSMH congresses and serve on its Committees.

IMPACT - AN INTERNATIONAL INITIATIVE AGAINST PREVENTABLE DISABLEMENT

Mrs. Melissa Wells, Director
UNDP, Palais de Nations
1211 Geneva, Switzerland
Established 1982

Sir John Wilson, Founder and Senior Consultant

IMPACT is an international programme to attack causes and consequences of avoidable disablement, to spread proven remedies and to promote low cost measures of prevention. It grew out of a seminar held at Leeds Castle, England, in November 1981, the International Year of Disabled persons.

IMPACT works in close cooperation with WHO, UNICEF and UNDP (United Nations Development Program).

INTERAID

100 Tsui Ping Road
Kwun Tong, Kowloon
Hong Kong

Rev. Adam Gudalevsky, Organizer

INTERAID is providing help to developing countries particularly in training of personnel (teachers, child care workers and parents). In 1987, for example, with minimal staff, short term training programs were offered in the People's Republic of China, Thailand, India, Uganda and Nigeria, emphasizing self-help and the use of local resources.

INTERNATIONAL ASSOCIATION OF WORKERS FOR MALADJUSTED CHILDREN (AWMC)

66 chaussee d'Antin
7500 Paris, France

Founded 1951

The purpose of this organization, which has national associations and individual members in 38 countries, is to help all workers for maladjusted children (eg those who have "inner and/or outward maladjustment"); to intensify their professional work; to urge recognition of the profession of "educateur" (trained child care worker); to serve as a documentation and guidance center; to develop the spirit of international cooperation among its members.

A General Assembly is held at four year intervals. 5 members of the Board constitute the Executive International Technical Committee. The Association is accredited to UNESCO and ECOSOC.

INTERNATIONAL CEREBRAL PALSY SOCIETY (ICPS)

12 Park Crescent
London W1N 4EQ, U.K.

Founded 1969

Growing out of the former World Commission for Cerebral Palsy of Rehabilitation International, the Society is concerned with all aspects of services for persons with cerebral palsy, regardless of intellectual ability; it encourages the formation of national organizations and development of research and services; it holds international seminars and provides information and advisory services to its membership in more than 50 countries.

INTERNATIONAL COUNCIL ON SOCIAL WELFARE (ICSW)

Kostelergasse 1/29
1060 Vienna, Austria

Founded 1928

ICSW has consultative status with ECOSOC, UNESCO, UNICEF, WHO, ILO, and official relations with the Organization of American States and the Council of

Europe. Regional offices are maintained in India, Ivory Coast, Federal Republic of Germany, Brazil and the USA. ICSW maintains effective liaison between social work and welfare organizations in all parts of the world, through its 70 National Committees and over 20 international non-governmental member organizations. World congresses are held every two years, plus regional conferences and seminars. The subject of services for people with disabilities is frequently included in the agenda of ICSW meetings.

INTERNATIONAL SPORTS FEDERATION FOR PERSONS WITH MENTAL HANDICAP (INAS-FMH)

Koninginnengracht 101
2514 AL The Hague
The Netherlands

1988-92 Chair: Fernando Martin Vincente
(President of A.N.D.E.)
Founded 1987

The International Sports Federation of Persons with Mental Handicap was founded in 1987 in The Hague and held its 2nd Assembly in November 1988 in Madrid. The Federation has participation from 26 countries and is a member of the Coordinating Committee of International Sports for the Disabled. Its first large sports event is scheduled for July 1989 in Harnösand, Sweden, with Bengt Nirje, Vice-president, officiating.

LEAGUE OF RED CROSS AND RED CRESCENT SOCIETIES

P.O. Box 276
1211 Geneva 19, Switzerland

Founded 1919

The League of Red Cross and Red Crescent Societies is the permanent liaison agent for National Red Cross and Red Crescent Societies in 132 countries to help them carry out their national and international activities.

Since 1921 the League has worked to develop interest among its member Societies in rehabilitation for disabled people, both civilians and war victims, and to broaden their activities by dealing also with persons who are mentally and socially handicapped. Some of these activities include provision of homes for mentally retarded people, sheltered workshops, clubs and handicraft centers.

In 77 of the Red Cross/Red Crescent national societies Youth Programs exist in favor of and with handicapped children or adults. These provide training of youth volunteers who may assist in care of handicapped persons, at home or in institutions, at camps or on excursions.

REHABILITATION INTERNATIONAL (RI)

25 East 21st Street
New York, NY 10010 - USA

Founded 1922

Rehabilitation International, formerly the International Society for Rehabilitation of the Disabled and originally oriented to physical disabilities, has given increasing attention to the problems of the mentally handicapped. Through its Committee on Special Education, now the Education Commission, RI has held international seminars on special education preceding each of its world congresses since 1960, with particular emphasis on the question of mental retardation. (See also report on the International Council on Disability for which RI provides the Secretariat services.)

Since 1980, RI has been working closely with UNICEF providing technical support in developing programs and materials on early childhood disability in more than 35 countries.

Rehabilitation International membership consists of Affiliated National Organizations, Associate Members and National Secretaries in more than 100 countries; in addition are 9 International Member organizations.

RI works in close cooperation with the United Nations, the UN Specialized Agencies and governmental and non-governmental organizations interested in the rehabilitation of people with disabilities. Its World Congresses, regional conferences and specialized meetings bring people together for the exchange of latest knowledge and techniques; it provides guidance and technical assistance, publishes an array of periodicals on disability issues, maintains Standing Commissions on Medical, Vocational, Education, Social, Organization and Administration, Technical Aids, Housing and Transportation, and Leisure, Recreation and Sports.

SPECIAL OLYMPICS INTERNATIONAL

The Joseph P. Kennedy, Jr. Foundation
1350 New York Avenue, N.W., Suite 500
Washington, D.C. 20005, USA

Founded 1968

Founder and President Eunice Kennedy Shriver

The Special Olympics, started in 1968, is an international program of physical fitness, sports training and athletic competition for children and adults with mental retardation. It accommodates competitors at all ability levels through competition divisions, based both on age and actual performance. Over 70 countries around the world have Special Olympics programs. A significant part of the program is the broad participation from the community, volunteers acting as coaches, helpers, organizers, friends.

WORLD CONFEDERATION OF ORGANIZATIONS OF THE TEACHING PROFESSION (WCOTP)

5, avenue du Moulin
1110 Morges, Switzerland

Founded 1952

The Confederation aims at gathering into one organization professional teachers from all stages of education; its 135 member organizations come from 85 countries. WCOTP activities include a biennial Assembly of Delegates, regional conferences, seminars and surveys; its publication Echo appears in seven languages.

In the field of rehabilitation, WCOTP held a European seminar in Dublin in 1974 on The Education of Handicapped Children. A Policy Statement on Education of Handicapped Children, adopted by the 1984 Assembly of Delegates commits WCOTP to develop efforts to aid education for disabled individuals at the national and international level.

3. Regional Organizations

NORDISKA FÖRBUNDET PSYKISK UTVECKLINGSHÄMNING (NFPU)

Nordic Association on Mental Retardation Established 1963

Dr Lasse Weckroth, Chairman
Kårkulla
21610 Kirjala, Finland

Meetings on mental retardation have been held from time to time in the Scandinavian countries since the end of the last century. In 1963 the Nordic Association on Mental Retardation was formed with membership open to all interested persons (now numbering well over 1,000). The executive board consists of representatives from each country, Denmark, Finland, Iceland, Norway, Sweden and since 1975, the Faeroe and Åland Islands. Congresses are held every three years, with seminars and symposia on special topics during the intervening years.

NFPU'S quarterly journal, edited for 25 years by Dr. Karl Grunewald of Sweden, in 1988 became the responsibility of Ule Hansen, with a change of title to:
PU-bladet
Svingit 2
8382 Hinnerup, Denmark

CARIBBEAN ASSOCIATION ON MENTAL RETARDATION AND OTHER DEVELOPMENTAL DISABILITIES (CAMROD)

Dr. M.J. Thorburn, President
9 Courtney Street or P.O. Box 849
Kingston, Jamaica Castries, St. Lucia Founded 1972

Organized in 1972 with its first conference held in Puerto Rico, CAMROD represents some 28 small island nations and territories. Conferences are held every two years, involving parents, professional workers, officials and interested citizens. Associations of parents and friends exist in many of the islands; overall there is a trend toward organization of coalitions concerned with support to all handicapping conditions. The cost of inter-island transportation and other economic problems present difficulties in organizational development in this area.

With assistance from Canada, in 1978 CAMROD established a Caribbean Institute on Mental Retardation and other Developmental Disabilities, located in Jamaica;

emphasis has been on provision of information, technical assistance and training of local workers, including mothers. The Partners of the America's disability program Partners Appropriate Technology for the Handicapped (PATH) is giving support to this regional resource center service.

ASIAN FEDERATION FOR PERSONS WITH MENTAL HANDICAP (formerly AFMR)

c/o Singapore Council of Social Services
11 Penang Lane, Box 08-03
Singapore 0923

Founded 1973

Established at the First Asian Conference on Mental Retardation in Manila, 1973, the Federation brings together parent and professional associations at its conferences held every two years in a different country: Japan, India, Malaysia, Hong Kong, Indonesia, Taiwan and Singapore. Thailand will host the November 1989 meetings.

An important goal of the Federation is to encourage the development of policies and methods culturally appropriate to the situation of persons with mental handicap in Asian countries.

NETWORK AFRICA

Secretariat: P.O. Box 42365
Nairobi, Kenya

Founded 1982/86

Network Africa was started in 1982 as the direct outcome of a workshop preceding the 8th World Congress of ILSMH in Nairobi, and adopted a full constitution in 1986. It has stimulated the development of several new societies in Africa and provides information and mutual support for parents and professionals, as well as advice for African governmental and non-governmental organizations. It has members from more than a dozen African countries including the Island of Mauritius, Cameroun, Ethiopia, Ghana, Ivory Coast, Kenya, Madagascar, Sudan, Uganda, Zambia and Zimbabwe. Additional countries are joining in the development of common standards for the training of various types of rehabilitation workers to provide sources for people with mental handicaps. Culturally appropriate training modules have been developed and field tested following workshops supported by ILO, ILSMH and the African Rehabilitation Institute.

EUROPEAN ASSOCIATION OF THE INTERNATIONAL LEAGUE OF SOCIETIES FOR PERSONS WITH MENTAL HANDICAP

Avenue Louise 248, Box 17
1050 Brussels, Belgium

Established 5/1988

Following the advice of the European Community's Bureau of Action in Favour of Disabled People, the ILSMH authorized its European Affairs Committee to establish the above Association, while retaining its status as a committee within the ILSMH structure. This permits official, direct representation of persons with mental handicap and their families at the European Community. ILSMH Council members in EC countries are ex-officio members of the Board of the European Association; ILSMH national member societies in Europe in non-EC countries may be affiliate members.

The aims of the Association are to encourage collaboration, circulation and exchange of information between the national associations in Europe; to cooperate with other European organizations and institutions; to promote, study and carry out tasks relative to the needs of persons with mental handicap and their families in Europe; to organize conferences and working groups in cooperation with the European Community agencies.

EUROPEAN ASSOCIATION FOR SPECIAL EDUCATION (EASE)

Secretariat:
Box 79, Nordstrandhogda
N-1112, Oslo 11, Norway

Founded 1968

A union of European national organizations working to improve the education, training and welfare of handicapped persons, to develop community awareness of their educational and social needs; to promote social integration; to arrange conferences and other meetings; to produce and distribute educational materials, and provide consultation on special education. Associate membership is open to non-European organizations and individuals. EASE is accredited to UNESCO and the Council of Europe.

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ALGERIA*

The Republic of Algeria, the second largest country in Africa, located in northwest Africa on the Mediterranean, has a population of 23.5 million (1987 estimate), with more than half being children and adolescents. The people are primarily Berber-Arabic, but there are also about 150,000 inhabitants of Turkish and other European descent, of whom less than 50,000 are French. The religion practiced is Sunni Islam, and Arabic is the national language. Algeria became independent from France in 1962. Its capital, Algiers has a population of 2.5 million.

Education is free and compulsory for 6 to 13 year olds. In 1962 the literacy rate was 20%; it is now about 80%. 40% of the national budget goes to education. Medical care is also free and socio-medical services are operated by governmental or semi-governmental agencies. Social security benefits are available to all workers, including those in agriculture and free professions.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministère de l'éducation et de l'enseignement fondamental	Ministry of Education
Direction de l'enseignement, Sous-direction de l'enseignement spécialé 8, avenue de Pékin, El-Mouradia, Algiers	Sub-Division of Special Education
Ministère de la santé publique 25 blvd. Laala Abd-ar-Rahmane El Madania, Algiers	Ministry of Health
Ministère de travail et affaires sociales rue Farid Zovieouche Kouba, Algiers	Ministry of Labour and Social Affairs
Ministère de la jeunesse et du sport 3 place du 1er mai, Algiers	Ministry of Youth and Sports
National coordinating body: Conseil national consultatif pour la protection des handicapés Secrétariat d'Etat aux affairs sociales 14, rue Mahmoud Boudjatit Kouba, Algiers	National Consultative Council for Protection of the Handicapped

VOLUNTARY ORGANIZATION

With Primary Concern in Mental Retardation

Association d'aide aux inadaptés 25, boulevard Salah Bouakouir Algiers	Association for Aid to the Retarded

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* Partially updated.

Started in 1974, this parents' society receives government assistance. It has pioneered in initiating services for retarded children and their families, and in public information programs. Since 1978 it has been instrumental in establishing a National Federation:

Fédération nationale des parents d'enfants inadaptés,
1 rue Hadj-Ahmed, Hydra, Algiers

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Most services are located in the capital, are day services, are free of charge and are for children and adolescents. A specialized school for the mildly retarded was already in existence at the time Algeria became independent in 1962, and a second one has been opened in Oran since then. Community day center services are provided at 7 centers established by the local parents' society; 5 are for moderately retarded children and some multiply handicapped children (ages 5 to 11), and 2 are for adolescents and provide vocational training and sheltered workshops.

The medico-psycho-pedagogical day center opened by the Ministry of Health in 1974 provides psychiatric and psychological treatment, psychomotor training and sensory stimulation for about 100 mentally handicapped and psychotic children aged 5 to 15. It also provides outpatient services for children, adolescents and adults. Parent consultation is also provided by the local parent's society and in all university hospitals (especially in the children's clinics), as well as in other psychiatric and psychological services run by the Ministry of Health.

Since 1973, specialized personnel training is being given for éducateur aides and éducateurs (child care workers). There were about 60 trained workers in the existing services in 1978.

OTHER INFORMATION FOR VISITORS

Requests for information, preferably in French or Arabic, can be made to:

Fédération nationale des parents d'enfants inadaptés
1, rue Hadj-Ahmed, Hydra, Algiers

or

Direction de la protection des handicapés
et de l'aide social (S.E.A.S.)
14, rue Mahmoud Boudjatit Kouba, Alger

School holiday periods - From July to mid-September.

In the existing centers, the holiday periods are about the same as in public schools. They are especially long in summer (two and one half months), and efforts are made in the centers to reduce them in order to intensify the care of the children.

ARGENTINA

Argentina has a comprehensive system of social security, including old age, invalidity and survivor's insurance, sickness and maternity benefits for employed women, and workmen's insurance. Since 1957 it has an employment related system of family allowances.

Although special education services have been developed in Argentina for several decades, they are not supported by specific legislative enactment. Furthermore, as in some other countries, special education services are partly within the system of health services. In the beginning, programs for the mentally retarded were maintained and supported largely by private organizations or individuals. This is still largely the case with services for the more severely retarded, as the public schools are accommodating more of the milder cases.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Educación	Ministry of Education
Dirección de Enseñanza Diferenciada Paseo Colón 533, 6° piso 1063 Buenos Aires	Department of Special Education
Superintendencia Nacional de Enseñanza Privada (SNEP) Avenida Santa Fe 4358 1425 Buenos Aires	National Supervisoy Office for Private Schools (including private schools for the mentally retarded)
Ministerio de Bienestar Social	Ministry of Social Welfare
Secretaría de Desarrollo Humano y Familia Defensa 120 1345 Buenos Aires	Secretariat for Human Development and the Family
Dirección Nacional de Salud Mental Defensa 120, 1345 Buenos Aires	Department of Mental Health
Dirección General del Discapacitado Lafinur 2988, 1425 Buenos Aires	Department of the Handicapped

Important Provincial Public Agencies - In each of the 22 provinces of Argentina there are comparable agencies. For example, Buenos Aires Province has more than 131 official schools for the mentally retarded. These include vocational training centers called "escuelas laborales" and "escuelas de adaptaciòn laboral para deficientes severos." Other provinces with a considerable number of services are Tucuman, Cordoba, Mendoza and Santa Fe.

National Planning and Coordination

Comisión Nacional para las Personas Discapacitadas Defensa 120, 1345 Buenos Aires	National Commission for Handicapped Persons

VOLUNTARY ORGANIZATIONS

Primarily Concerned with Mental Retardation

Professional

Asociación Argentina para el Estudio Científico de la Deficiencia Mental Avenida La Plata 111 (1184) Buenos Aires	Argentina Association for the Scientific Study of Mental Deficiency

Organized in 1967, the Association is affiliated with the International Association for the Scientific Study of Mental Deficiency.

Private

Federación Argentina de Entidades Pro-Atención al Deficiente Mental (FENDIM) J. Newbery 3546 1427 Buenos Aires	Argentina Federation for the Mentally Retarded

Established in 1966 and uniting more than 140 associations of parents throughout the country, FENDIM holds symposia and conferences and, in connection with its technical advisory board, promotes public information, studies legislative needs, presses for extension of governmental programs for the retarded through its affiliates, and provides counseling services for parents. Most of its affiliates support day schools and/or vocational training or sheltered work programs. FENDIM became a member of the International League of Societies for the Mentally Handicapped in 1968.

RESEARCH

In Buenos Aires

Hospital de Niños
Servicio de Neurología
Bustamante 1399
1425 Buenos Aires

CEMIC
S. de Bustamante 2560
1425 Buenos Aires

Centro de Estudio y Asistencia
Médico-Psyquiátrico de la
Niñez y Adolescencia (CEAM)
Freire 2145

In La Plata, Province of Buenos Aires

Hospital de Niños Servicio de Psicopatología	Dirección de Enseñanza Diferenciada de la Provincia de Buenos Aires Diagonal 74, esquina 57

Universidad Nacional de la Plata
Facultad de Humanidades y Ciencias de
la Educación, Cátedra de Pedagogía Diferenciada
Calle 6 entre 47 y 48

Similar programs exist in other universities throughout the Provinces. A list is available through FENDIM.

PUBLICATIONS

Boletín de la Asociación Argentina para el Estudio Científico
de la Deficiencia Mental
Avenida La Plata 111, 1184 Buenos Aires

Revista de Sanidad Escolar
Saavedra 15, Buenos Aires

Boletín Informativo de Enseñanza Diferenciada
Diagonal 74 Esquina 57, La Plata, Provincia de Buenos Aires

Revista de Educación del Ministerio de Educación de la
Provincia de Buenos Aires

Archivos de Ciencias de la Educación
Calle 45, No. 548, La Plata, Provincia de Buenos Aires

Anales del Instituto de Investigaciones Psicopedagógicas
Universidad Nacional de Cuyo, San Luis

Revista FENDIM
Jorge Newbery 3546, 1427 Buenos Aires

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents is carried out by the hospital services, especially in departments of pediatrics, psychiatry and neurology. Certain centers especially concerned with the problem have been listed above, under Research. Pediatricians are showing a growing interest in mental retardation, and multidisciplinary training of other medical professions, of psychologists and teachers, is being developed in recent years. A main goal of FENDIM is to provide consultation and services to parents.

Education - Throughout the country there are about 250 special schools concentrated in the more densely populated areas. It is estimated that they do not cover the necessities of the mentally retarded population. There are also a rather large number of private institutions, mainly for smaller children, well-staffed with young teachers, but the majority of all these schools accept only mildly and some moderately retarded children. There is resistance on the part of the public and the education authorities to the idea of integrating special education in the system of general education. Some of the difficulties originate in the scarcity of funds for education, in the low population density in rural areas complicating the provision of services, and in the lack of public understanding. Nevertheless, during recent years the number of special schools has increased due to the efforts of the parent associations.

Work Training and Employment - Planning for provision of these services is still quite new. In the 5 public special schools in Buenos Aires vocational training workshops operate after the regular school hours. In some schools in the Province of Buenos Aires (for example, in Berisso) a beginning has been made with the placing of retarded pupils for training in neighborhood industries. There exist today 40 protected workshops and 29 being established.

Medical Services - Specialized medical attention is available from centers indicated above under Case Finding and Diagnosis.

Residential Care - Until now this has been provided in wards of psychiatric hospitals, under supervision of the Instituto Nacional de Salud Mental, or in its 4 specialized institutions for severely and profoundly retarded persons. There are also private institutions, including special boarding schools. The Hospital Infanto Juvenil in Buenos Aires (see above under Research) includes modern accommodations for the mentally retarded. Group homes are being established by parents associations such as DINAD, CHECAR, INCUDI, etc.

Financial Assistance - Financial assistance to establishments for handicapped persons is subsidized to a certain extent by the Ministry of Social Welfare or the Secretariat of Public Health. People who can pay for hospital care must do so; those who cannot are attended free. Establishments for the mentally retarded, if governmental, are free, but mostly a "cooperativa de padres" (parents support group) is formed to enable better attention to be given the pupils. Private schools and residential care units are rather expensive or are maintained by an "Asociación de Padres." FENDIM has been able to obtain from the Ministry of Social Welfare a subsidy for special cases.

Recreation is generally available as an adjunct to day and residential schools; there are some special programs for adults who are mentally retarded.

Research - So far the national and provincial governments have not set aside funds for research, with the exception of the Province of Buenos Aires which recently established an Office of Research. However, considerable research has been carried on by physicians, psychologists and educators at institutions of higher learning and at the larger hospitals (see above).

Personnel Training - Systematic training of teaching personnel is provided at mostly all national and private universities. There is also systematic training of medical and psychological professionals in mental retardation. Post-graduate courses are offered in some facilities, such as the Children's Hospitals of Buenos Aires and La Plata.

Planning - There has been no specific planning in prevention, although various legislative proposals have been under consideration. A legislative proposal relating to the protection and work of the mentally retarded was recently presented by FENDIM to the Ministries of Labor and Justice.

OTHER INFORMATION FOR VISITORS

Assistance in obtaining information and planning visits can be requested from the following:

Dirección Técnica General de Asistencia al Escolar
Pizzurno 935, Buenos Aires

FENDIM
Jorge Newbery 3546, 1427 Buenos Aires

Asociación Argentina para el Estudio Científico
de la Deficiencia Mental
Avenida La Plata 111, 1184 Buenos Aires

School Holidays - are from approximately December 1 to March 10. A brief winter vacation occurs during the last week of July. The preferable months for visitors are April through June, and August through October.

AUSTRALIA

Although the Commonwealth Government has a role in coordination, health and education services are administered mainly by the six States (New South Wales, Victoria, Queensland, South Australia, Western Australia, Tasmania) and two internal territories (the Northern Territory and the Australian Capital Territory). Municipal authorities play no role in these areas. In 1975, a universal health insurance scheme administered by the Commonwealth Government was instituted. Education is compulsory in most States for ages 6 - 16. There are at present striking variations in intellectual disability services from State to State.

COMMONWEALTH AGENCIES WITH INTELLECTUAL DISABILITY RESPONSIBILITY

Commonwealth Department of Community Services
PO Box 1
WODEN, ACT 2606

Commonwealth Department of Social Services
PO Box 1
WODEN, ACT 2606

Commonwealth Department of Health
PO Box 100
WODEN, ACT 2606

Commonwealth Department of Employment & Industrial Relations
GPO Box 9880
CANBERRA, ACT 2601

Commonwealth Department of Education
PO Box 826
WODEN, ACT 2606

State - There are autonomous State Government Departments of Education, Health and Mental Health, Welfare or Youth and Community Services. There are also Regional Offices of the Australian Departments of Community Services, Social Security, and Employment and Industrial Relations located in each State, with a director in each capital city.

National Planning or Coordinating Body - In 1983, the Commonwealth Government established the Disability Advisory Council of Australia, administered by the Commonwealth Department of Community Services.

State Planning Bodies - Some state governments have advisory committees on intellectual disability or coordinating committees for the handicapped.

NON-GOVERNMENTAL ORGANIZATIONS

With Primary Concern in Intellectual Disability

Professional

Australian Society for the Study of Intellectual Disability (ASSID), formerly the Australian group for the Scientific Study of Mental Deficiency (AGSOMD).
President: Dr. R. Cummins
Faculty of Special Education and Paramedical Studies
Victoria College
221 Burwood Highway
BURWOOD, VIC 3125

Founded in 1965, ASSID is one of the most active members of the International Association for the Scientific Study of Mental Deficiency, counting nearly 800 members who represent over 20 disciplines. In addition to national conferences, state and territory branches hold regular meetings and seminars.

Citizen

The National Council on Intellectual Disability
Executive Officer: Mr. Roger Barson
GOP Box 647
CANBERRA, ACT 2601

The National Council on Intellectual Disability (formerly AAMR, Inc.) was established in 1970 as successor to the 18 year old Australian Council for the Mentally Retarded. It is a member of the International League of Societies for Persons with Mental Handicap and represents all of the state and territory Associations. Other voluntary bodies within Australia which are not state associations have associate membership. In addition to such goals as mutual support, coordination and stimulation of efforts, and promotion of better public understanding, an important purpose of the Council is to obtain recognition by the Commonwealth Government of intellectual disability as a major national problem, and to secure supportive legislation and financial aid.

Other National Non-Government Organizations which Include Intellectual Disability

ACROD (Australian Council for Rehabilitation of the Disabled)
PO Box 60
CURTIN, ACT 2605

ACROD conducts national consultations and lobbies the Commonwealth and State governments on issues affecting all disabled people. It has committees on access and mobility, women's issues, recreation, health and medical aspects of rehabilitation, accreditation and standards review. The Council is a member organization of ACROD, with representation on its national executive committee.

Disabled People's International (Australia), President: Graeme Innes c/- DPI Resource Centre 397 Lyons Road FIVE DOCK, NSW 2046	A national multidiagnostic advocacy/consumer organization, founded in 1983.
Australian Association of Special Education Secretary: Dr. Peter O'Connor GPO Box 1998 CANBERRA, ACT 2601	The professional association of special education teachers.
Federation of Autistic Children's Associations of Australia 545 Pacific Highway, ARTAMON, NSW 2064	Has goals similar to those of the Council.
Australian Association of Toy Libraries for the Handicapped c/o Noah's Ark Toy Library 28 The Avenue, WINDSOR, VIC 3181	Serving families of disabled children since 1976.

RESEARCH

Children's Medical Research Foundation
Royal Alexandra Hospital for Children
SYDNEY, NSW

Grosvenor Hospital
SYDNEY, NSW

Irrabeena Diagnostic and Assessment Centre
PERTH, WA

Schonell Educational Research Center
University of Queensland
ST. LUCIA, QLD. 4067

Monash University School of Education
CLAYTON, VIC

Royal Children's Hospital
MELBOURNE, VIC

Mental Health Research
Institute, MELBOURNE, VIC

Unit for Rehabilitation
Studies, School of Education
Macquarie University
RYDE, NSW 2113

PUBLICATIONS

Journals

Australian and New Zealand Journal of Developmental Disabilities, quarterly journal of the ASSID and the New Zealand Association for the Scientific Study of Mental Deficiency, and ASSID Newsletter.
Editor: Prof. Trevor Parmenter
School of Education, Macquarie University
RYDE, NSW 2113

The Australian Medical Journal and the Australian Journal of Psychiatry include occasional articles on mental retardation.

The Exceptional Child (formerly The Slow Learning Child), quarterly publication of Schonell Centre.
Editor: W C Apelt, Schonnel Educational Research Centre, University of Queensland
ST LUCIA, QLD 4067

Interaction (Formerly AAMR Journal) quarterly of the Council. First published in 1962 as Australian Children Limited
Editorial Committee
GPO Box 647
CANBERRA, ACT 2601

Australian Journal of Special Education
Editor: Dr. Jeff Bailey, School of Education,
Darling Downs Institute of Advanced Education
PO Box 30, Darling Heights
TOOWOOMBA, QLD 4350

State Associations issue newsletters and other publications, some of which have been in existence for many years.

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Case Finding, Diagnosis and Assessment, Consultation with Parents - Specialized diagnostic centres can be found in the major cities and in connection with the larger children's hospitals. Such services are less likely to be available in rural areas, although travelling diagnostic teams are now being used much more effectively. Specially trained public health nurses are also being used as a resource for case finding and screening programmes. The parents associations have provided a considerable amount of counselling and parent education, increasingly by full-time professional staff. There is still a considerable role for volunteers, but it is a changing one. While still being very much concerned with person-to-person service, the place of parents and other volunteers on the formal planning committees for state-run services is gradually being recognized.

Education for every school-age child with a disability has yet to be achieved, but a basic education programme is being developed for an increasingly large majority of these children. State Education Departments now provide special schooling for virtually all mildly and moderately intellectually disabled children, and most States are now beginning to look at programmes for the severely and profoundly disabled. Increasing responsibility for education of children with disabilities has been handed over from voluntary organizations to the State. Integration of these students into ordinary schools, whether in special classes or in the general classroom with support staff, is underway in all States. A 1981 survey found that 36% of intellectually disabled children attend ordinary classes in ordinary schools. Attention is now being focussed on retention of disabled students in education beyond the age of 15 years.

Work Training and Employment - Vocational counselling and training is provided in only a minority of special schools, and in many instances consists of work experience in a sheltered workshop. However the State-run Colleges of Technical and Further Education (TAFE) have recently begun to cater to special students seeking vocational training through access to their general courses and a variety of special arrangements. The particular employment disadvantages of those with intellectual disabilities are specifically recognized in the Commonwealth Department of Employment and Industrial Relations' several employment/training programmes for disadvantaged people. The other major training agency is the Commonwealth Rehabilitation Service (CRS) which offers both vocational and social rehabilitation for disabled people of working-age. The CRS now has seven work preparation centres (one in each state, except Tasmania) oriented specifically to training mildly intellectually disabled adolescents for open employment.

The majority of intellectually disabled adults still work in sheltered workshops (for the more capable) or activity therapy centres (for the less capable), run by community organizations with Commonwealth Government subsidies. However, a minority are taking their place in open employment. It is likely within the next few years that the general training component in these centres will increasingly devolve upon TAFE Colleges; training for open employment will become a specialized function of some centres; and those centres continuing to provide long-term employment will be obliged to provide productivity-based minimum wages and accord the usual industrial rights to their disabled employees.

Medical Care - Regional health teams are now servicing rural centres more effectively and there is usually at least one member of the team with some expertise in mental retardation.

Residential Care - Large state institutions of the traditional type can still be found in some states, although there is increasing emphasis on housing in the community. Major de-institutionalization programmes are underway in Victoria and NSW; and all States are scaling down the size of residential facilities. St. Nicholas Hospital in Melbourne has been sold and all its "long term care" residents placed in homes in the community. Many State Inquiries have recommended that residential services be removed from the aegis of health authorities, and placed either under a community services department or an independent body. So far only WA has implemented the latter recommendation.

Over 78 voluntary organizations (both religious and non-sectarian) run private residential facilities, and their relative independence has enabled some to advance beyond the level of the state institutions; most do not accept persons with very severe handicaps.

Community residences for adults are being established in increasing numbers by both voluntary and government organizations, and include farm hostels, small group homes, boarding homes, semi-independent and independent living with community support services. On average, each house has 5 to 10 residents.

Financial Assistance - Most of the individual pieces of Commonwealth Legislation referring to handicapped persons were consolidated under the

Handicapped Persons (Assistance) Act in 1975. Through the Department of Social Security, cash benefits for maternity, sickness and unemployment, and a variety of other situations are provided. A family allowance covers children up to 16 years of age and students to age 25; non-means tested but taxable, it is payable to parents whether the child is living at home or in an institution. The Handicapped Child's Allowance of $85 per month is available to parents or guardians caring for the child at home; it is not subject to a means test and is not treated as income in assessing other social security benefits.

There is no charge to parents for care of their children in state institutions. A Handicapped Child's Benefit is payable to private residential facilities and nursing homes accepting such children. Parents may be eligible for the Isolated Child Allowance if they have to establish a second home or place the child in a residence in order to obtain appropriate education. In some states, assistance is available with transport costs, which may be considerable for families living in remote areas. An Invalid Pension is available after the age of 16 years to those not in employment, and for those working in sheltered workshops a Sheltered Employment Allowance is payable. Those in activity therapy centres receive an Incentive Allowance plus the Invalid Pension. A mobility allowance is available to those in training or education and unable to use public transport.

In 1967 the Department of Social Services (now Community Services) commenced partial subsidies to voluntary organizations in the field of training, vocational rehabilitation and residential services. This scheme has assisted the development of services across the nation and the government has maintained significant financial input. Following exhaustive reviews of its programmes, the Department recently adopted the philosophy of the Least Restrictive Alternative.

While a universal health insurance plan was introduced in 1975, many Australians still belong to private health insurance schemes. All citizens must be covered by one or other form of health insurance.

Recreation - Gradually increasing integration of disabled people into community recreational activities co-exists with segregated programmes, particularly sporting events. Recreation programmes are often organized at municipal level, sometimes with State funding, and thus there are extreme variations in the quality of services and range of opportunities available. The importance of leisure time and of having choices in what to do with it is slowly being appreciated, and in some cases young intellectually disabled people are now successfully running their own recreation clubs.

Research - The membership of AASID and its journal attest to the quality of interdisciplinary collaboration in research and practice. Among the centres of research into intellectual disability are the larger children's hospitals in the state capitals and the various specialized diagnostic and assessment centres. Research in these and in university centres has been primarily biologically oriented; behavioral and educational research can be mentioned in the universities of Queensland, Victoria, New South Wales and, more recently, in a number of Colleges of Advanced Education.

Personnel Training - The majority of disciplines concerned (with the exception of Education) do not provide specialized training in mental retardation. As in most countries, the orientation to mental retardation given in training courses for medical students, psychologists and therapists is still minimal. Some of the major medical centers have specialists in intellectual disability, and to some extent seminars and meetings of the Council, ASSID and ACROD attempt to fill in this void.

Basic nurse training in intellectual disability previously available in some states is being phased out in favor of a college-based general nursing course. Most states now offer a career course for residential care staff not based on a nursing model. Further courses are being initiated in several states for staff working in the sheltered employment, activity therapy, and child care services. Special Education teachers in general undertake the usual teacher-training course, followed by a post graduate qualification in special education.

Prevention - Planning for prevention is evident with wide use of screening tests for phenylketonuria and other metabolic disorders at maternity hospitals and baby health clinics. Amniocentesis is available in high risk pregnancies and there is a free anti-rubella and anti-measles immunization service. Genetic counselling is available in the major cities.

Citizen Advocacy and Self-Advocacy - Citizen advocacy programmes now operate in four states, with another two planning for its establishment. A few Self-Advocacy groups have succeeded in challenging assumptions about intellectually disabled people's capacity to speak for themselves and several inter-state conferences/meetings have been organized by these groups. There is also a general awareness growing among service-providing organizations of the need to involve disabled clients in the management of services, though very little experience in appropriate mechanisms for such involvement has yet been gained.

OTHER INFORMATION FOR VISITORS

Both the Council and ASSID will provide further details about visits. Departments of Education and Health in each state also provide information, as will the Department of Community Services.

School Holiday Periods - Schools have a four term schedule with holiday periods varying among states by a week or two. The school year begins in February and has three short holidays falling between March/April, June/July, September/October; a six week summer vacation starts in mid-December. The university year is from March to November, with a variety of term/semester holiday arrangements.

AUSTRIA

Although most of the governing power rests with the federal government, the states have considerable legislative powers in local, regional and social welfare matters, as well as the supervision of local and regional administration. Thus while educational legislation is the prerogative of the federal government, the individual states have regulatory and administrative power especially in regard to primary schools. Social legislation rests with the individual states, resulting in considerable differences between the nine states, not only in education but also in legislation relative to public assistance and to specific disabilities.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

On the Federal Level

Bundesministerium für Familie, Jugend und Konsumentenschutz, Sektion III Schubertring 14, 1010 Wien	Ministry for Family Affairs Youth and Consumer Protection
Bundesministerium für soziale Verwaltung, Sektion IV Stubenring 1, 1010 Wien	Ministry for Social Administration
Bundesministerium für Unterricht Kunst und Sport, Abteilung I/1c Minoritenplatz 5, 1014 Wien	Ministry for Education, Arts and Sport, Department I,1c

On the Regional (State) Level

The state governments all have departments responsible for matters of social welfare, including issues dealing with mental retardation. They rarely run service agencies themselves, but regional legislation provides for a coordination, supervision and funding responsibility. Information about regional services can be obtained from the states.

Planning and Coordination is the responsibility of the social welfare departments of the state governments; a periodical conference of the regional Secretaries of Social Welfare serves as a coordination body. The federal ministries listed above are responsible for planning and coordination in their respective fields. The Austrian Rehabilitation Council, the non-governmental umbrella council of organizations concerned with persons with disabilities, also claims coordination responsibilities. However, there is no national planning group or coordination body of any real impact.

Lebenshilfe, the national parents' association, discusses at its regularly scheduled sessions with representation from all regional associations, the need for services for persons with mental retardation, and the support needed by parents; it provides guidelines and organizational assistance, and confers with the national and regional governments and agencies.

VOLUNTARY ORGANIZATIONS

Primarily Concerned with Mental Retardation

Citizen

Lebenshilfe Österreich
Dachverband für Menschen mit
geistiger und mehrfacher Behinderung
Schönbrunner Strasse 179, 1120 Wien

Austrian National Society for
Persons with Mental and Multiple
Handicap

This parent sponsored association which is actively supported by professionals in the field was founded in 1963 by the union of the regional "Lebenshilfe" (Life-Help) Associations in Vienna, Graz and Klagenfurt; it has spread all over Austria with branches in eight of the nine states, and some 100 local groups. It has been a member of the International League of Societies for Persons with Mental Handicap since 1964, and hosted its 1978 World Congress. While the eight regional associations provide services in all program areas except schooling, the national organization acts as a national pressure group, does some research particularly in areas of family interest, maintains a library and documentation center and publishes parent-oriented materials, including a national quarterly. Biannual conferences focus on development issues and gather active parents from all over Austria; workshops and seminars provide information and training both for parent leaders and professionals.

Professional

Österreichische Gesellschaft für
Heilpädagogik, Burggasse 14, 1070 Wien

National Society for Curative
Education

Members of this organization are special educators, physicians, therapists, psychologists, social workers and other staff working in child welfare services and services for handicapped persons. It has branches in the various states. Its major activities are the publication of a quarterly journal and biannual national congresses, mostly directed at the needs of professionals in the field.

Verein der Fachbetreuer geistig und
mehrfach behinderter Menschen
Latschkagasse 4/5, 1090 Wien

Association of Care Workers in the
Field of Mental Retardation

Others which Include Mental Retardation

Österreichische Arbeitsgemeinschaft
für Rehabilitation
Brigittenauer Lände 42, 1200 Wien

Austrian National Rehabilitation
Council

The Rehabilitation Council is a voluntary national umbrella organization of both private and governmental agencies in the field of social welfare and handicap. It attempts to coordinate the work of these different bodies and to serve as a national pressure group on behalf of handicapped citizens.

Österreichischer Dachverband zugunsten behinderter Kinder und Jugendlicher Albertstrasse 8, 8010 Graz	National Parents' Association for (physically) Handicapped Children and Youth
Österreichische Caritaszentrale Nibelungengasse 1-4, 1010 Wien	Central R. Catholic Welfare Organization, providing mainly post-school services
Diakonisches Werk für Österreich Steinergasse 3, 1170 Wien	Protestant Welfare organization (maintaining several large residential facilities)
Österreichische Gesellschaft "Rettet das Kind" Pouthongasse 3, 1150 Wien	Austrian "Save the Children" Society
Österreichisches Komitee für Sozialarbeit Schottenring 24, 1010 Wien	Austrian Council on Social Welfare (Member of the International Council on Social Welfare)

RESEARCH

Medical and behavioral aspects of mental handicap:

Ludwig Boltzmann Institut zur Erforschung kindlicher Hirnschäden,
Vorstand: Univ.-Prof. Dr. Andreas Rett
Neurologisches Krankenhaus der Stadt Wien
Riedelgasse 5, 1120 Wien

Heilpädagogische Abteilung der Universitäts-Kinderklinik
Vorstand: Univ.-Doz. Dr. Christoph Groh
Währinger Gürtel 18-20, 1090 Wien

Psychological, behavioral and educational aspects:

Institut fur angewandte Psychologie der Universität Wien
Vorstand: Univ. Prof. Dr. Paul Innerhofer
Neutorgasse XX, 1010 Wien

Sociological and planning aspects of mental handicap:

Institut für soziales Design, Entwicklung und Forschung
Grenzackergasse 7-11/19, 1100 Wien

Some research especially in family related aspects of mental handicap is also being carried out by the Austrian National Society for Persons with Mental Handicap, "Lebenshilfe Österreich".

PUBLICATIONS

Lebenshilfe, quarterly journal published by Lebenshilfe Österreich; focusing exclusively on the needs of persons with mental handicap and the families.

Behinderte in Familie, Schule und Gesellschaft, quarterly journal published by the Austrian Parents Association of physically handicapped children, youth and adults, both mental and other handicaps.

Heilpädagogik, quarterly journal of the Austrian Society for Curative Education; emphasis on questions related to special education, mental and other handicaps.

mobil, a commercially published monthly magazine devoted to issues of handicap, health and socially disadvantaged groups.
Leebgasse 104, 1100 Wien

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents -Early identification takes place mostly through pediatricians and medical specialists, in rural areas through general practitioners, through an early identification system known as the "Mutter-Kind-Pass" (mother-child-passport). This requires all mothers, starting with pregnancy, to participate in a system of regular medical assistance up until the age of 2. There is a substantial financial reward in completing the mother-child-passport, participation, however, is voluntary. Early identification is further facilitated by the fact that approximately 75% of all infants are seen in Mothers' Counselling Services (well-baby-clinics). There is no mandatory registration with regard to mental retardation.

Despite a system of early identification, early treatment, parents counselling and early educational intervention are still somewhat lacking. Networks of consultation and early intervention are now set up in all states and provide help to the families. Early treatment is available from the Heilpädagogische Abteilungen (Departments of Curative Education) in the capitals of the regional states, as well as from specialized clinics. Medical examinations, consultation and treatment are generally free, although parents sometimes have to pay parts of private therapeutic help.

Parent-to-parent programs exist in some of the states, e.g. in Vienna, Graz and Salzburg, and are usually run by the regional Lebenshilfe association or local parent groups. Efforts to start a system of toy libraries are now underway on the basis of pilot projects.

Education - While kindergartens may be either public or private, practically all schools (with two or three exceptions) are run by the states. Nine years of elementary school are compulsory for all children (6 to 15 years), including mentally retarded children for whom Austria provides two types of schooling: the special school for slow learners (Allgemeine Sonderschule), and the special school for severely (mentally) handicapped children (Sonderschule für schwerstbehinderte Kinder). School classes of either type can be attached to general or other special schools. At the request of parents, school education can be extended for mentally handicapped children until the age of 18. Approximately 500 children were not admitted to schools in 1986.

Special kindergartens (and groups of handicapped children attached to general kindergartens) are available throughout the country, although the capacities are limited, especially in rural areas. In the past few years, children with mental retardation have been increasingly integrated into the regular kindergartens. There are quite a few parent-sponsored projects running integrated kindergartens. The willingness of general kindergartens to accept handicapped children has increased with the decreasing number of children in general.

In the past few years a nation-wide discussion on integrated schools has got underway; in '86/'87 nine pilot projects of general classes integrating mentally handicapped children with the help of a second (special) teacher are being carried out. Chances for an increasing number of integrated school classes are good. Information on these developments can be obtained from Behinderte und Nichtbehinderte gemeinsam in Schulen (handicapped and non-handicapped go to school together), 7411 Markt Allhau 5, or from Arbeitsgemeinschaft Integration (Coalition for Integration) c/o Renate Jung, Kherckgasse 49/1, 1235 Vienna.

Work Training - There is a nationwide network of day-care centers, some of them also serving as work-training centers. The centers are either run by the parents' association, Lebenshilfe, (the largest provider of community based services in Austria) or other private or semi-private organizations; very few services are provided by the states themselves. Some young people are successfully receiving apprenticeship training in a Technical High School, e.g. in Vienna. While there are efforts to provide open work (with financial benefits for employers) for handicapped persons, including mentally handicapped, the actual number of persons with mental retardation being employed is small.

Residential Care - Providing community based residential care is one of Austria's most pressing problems. While there is still a number of institutions, including psychiatric hospitals and homes for old people (some of which accept persons with mental handicap as young as 15), new residential care facilities are usually group homes, with no more than 25 persons. The Austrian Council on Social Work, which has some policy impact vis-a-vis the states, has recently published guidelines which call for small group home and core-and-cluster type residential care.

Medical Care - There are still too few physicians who have specialized in mental retardation and the number of specialists such as pediatricians and neurologists, who also are well informed about mental retardation, is limited. Little updated information on mental handicap is given to medical students, or is available for graduate students or practitioners.

Financial Assistance - The system of financial assistance is confusing and depends in part on different regulations in the nine states; financial assistance for families and for persons with mental handicap is acceptable in some of the states, while it is troublesome in some others. The federal state has a family allowance plan which provides increased (double) child benefits, continued indefinitely if the child (later adult) is disabled and the person's monthly earnings do not exceed an income limit. Aside from that there are various financial benefits coming from the regional states and social security. In most states services, including medical care and technical aids, are free or fees limited not to exceed allowances paid by the state; there are, however, some situations where parents have to pay considerable amounts for some services.

Personnel Training - While there is adequate training for kindergarten and school teachers, almost all other program areas still lack training opportunities and enough well trained personnel. Special education teachers receive a three-year training in educational colleges (which are also training other elementary school teachers); kindergarten teachers who specialize receive two years of training on top of the regular three years of mandatory training for kindergarten.

Two of the universities, in Vienna and Klagenfurt, offer university courses and degrees in special education, including adult education. There are training opportunities for vocational and other therapeutic professions, with limited capacities however. Staff who work in day centers, residential care facilities, or other types of service settings can participate in two-year courses parallel to their work.

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in planning visits should be addressed to:

Bundesministerium für Familie, Jugend
und Konsumentenschutz
Leiter der Sektion III
Schubertring 14, 1010 Wien

to other governmental agencies listed in this report, or to:

Lebenshilfe Österreich
Schönbrunner Strasse 179, 1120 Wien

Summer Vacations (of schools) last two months in Austria, starting approximately July 1 in the eastern part of the country, and a week later in the western part.

BELGIUM

Geographically and culturally, Belgium is at the crossroads of Europe, divided ethnically today into the French-speaking Walloons in the south, representing 34% of the population, and the Flemings in the north, representing 50%, with the mixed population in Brussels the remaining 16%. The predominant religion is Roman Catholicism. Agriculture accounts for only about 5% of the gross national product in this country, one of the world's densest population and industrial centers with a high standard of living and, until recent recession, full employment.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministère de la Communauté Française Direction des affaires sociales Manhattan Center 3 rue des Croisades, 1000 Bruxelles	Responsible for residential institutions (children or adults), small homes, day centers and other services for the French speaking part of the country.
Ministrie van Vlaamse Gemeenschap Nijverheidstraat 37, 1040 Brussel	Same responsibilities as above for the Flemish part of the country.
Ministère de la Santé Publique Cité Administrative de l'Etat Quartier Vésale 20 rue Montagne de l'Oratoire 1010 Bruxelles	Ministry of Health-Responsible for residential services, and day centers for Brussels only.
Ministère de l'Education Nationale Direction de l'Enseignement Special rue de la Charite 28, Bruxelles	Ministry of Education-Special Education Department for the French speaking schools.
Rijksadministratief Centrum Arcadenojebouw, Brussel	Special Education Department for the Flemish speaking schools.
Ministère du travail Fonds National de Reclassement Social des Handicapés rue du Meiboom 14, 1000 Bruxelles	Ministry of Labour-Fund for social rehabilitation assistance and financial help to sheltered workshops - (all categories of handicapped persons included).
Ministère des affaires sociales Service des Prestations Familiales et Allocations aux Handicapés rue de la Vierge Noire 3c 1000 Bruxelles	Ministry of Social Welfare-Gives increased family allowances to families having a handicapped child and pensions to the adults (all handicaps).

Oeuvre National de l'Enfance (ONE) 67 avenue de la Toison d'Or 1060 Bruxelles	National Children's Agency (now divided into a Flemish and a French branch).

Subsidized by the State, through the Ministère de la Communauté Française and Ministerie van Vlaamse Gemeenschap, ONE's major activity in mental retardation is case finding through its well-baby clinics which reach a great majority of the babies born in Belgium.

Provincial Agencies

Agencies providing help to persons with handicaps, subsidized by the provincial governments, are in Namur, Hasselt, Antwerp (2) and Brugge.

National Planning Bodies

Counseil Superieur des Handicapés rue de la Vierge Noire 3c 1000 Bruxelles	Special Commission for the Handicapped

This Special Commission of the Ministry of Social Welfare was formed to study all social problems of handicapped persons. It includes representatives of the various ministries and representatives of private and voluntary bodies working on behalf of all categories of handicapped persons.

There is now a division between the administration and services for the French speaking part of the country and the Flemish, with special commissions attached to each regional ministry.

Vlaamse Hoge Raad voor Gehandicapten Nijverheidstraat 37 1040 Brussel	Advisory committee for the Ministry of Social Affairs of the Flemish community. It includes representatives of voluntary bodies working on behalf of all handicapped persons.
Conseil Communautaire Consultatif pour les personnes handicapées Ministère de la Communauté Française Manhattan Center rue des Croisades 3 1000 Bruxelles	Advisory commission for the Minister Social Affairs of the French community. It includes representatives of voluntary bodies working on behalf of all categories of handicapped persons.
Commission de programmation also attached to Ministry of French Community	Includes representatives of institutions, hostels, etc. and representatives of the trade unions of personnel of the service. In charge of giving advice regarding building of new institutions, houses, etc. and advice regarding functioning regulations.

VOLUNTARY ORGANIZATIONS

Primarily Concerned with Mental Retardation

Professional

Group Belge d'Etude de
l'Arrieration Mentale
13, rue Forestière
1050 Bruxelles

Belgian Association for the Scientific
Study of Mental Deficiency

Affiliated with the International Association for the Scientific Study of Mental Deficiency.

Citizen

Association Nationale d'Aide aux
Handicapés Mentaux
Nationale Vereniging voor hulp aan
Verstandelijk Gehandicapten
13, rue Forestière
1050 Bruxeles

National Association for Mentally
Handicapped

Started in 1959 and one of the founding members of the International League of Societies for Persons with Mental Handicap, the Association has now a membership of over 6,000 in 30 branches throughout the country. It has promoted changes in social and financial legislation, provided continuous parent counselling and public education, started pilot facilities, and has the official patronage and active interest of Queen Fabiola.

Including Mental Retardation

Ligue Belge d'Hygiène Mentale
rue de Florence 39
1050 Bruxelles

Belgian Association for Mental Health

Ligue Nationale d'Aide aux Paralysés
Cérébraux
rue Puccini 22
1070 Bruxelles

(Cerebral palsy)

Ligue Nationale Belge contre l'Epilepsie
avenue Albert 135
1190 Bruxelles

(Epilepsy)

Federation des Institutions
Spécialisées d'Aide a la Jeunesse
rue de l'Industrie 17
1040 Bruxelles

A member of Caritas Catholica, the Federation is an organization of institutions, most of which are for the mentally retarded.

V.I.G.B.J. Guimardstraat 1 1040 Brussel	Same as above for the Flemish.
Katholieke Verenigning voor Gendicapten Nationalestraat III 2000 Antwerpen	Catholic Association for the Handicapped (working mostly for the physically handicapped) in the Flemish part of the country.
A.C.I.H. (Association Catholic des Invalides et Handicapés) rue de la Loi 121 1040 Bruxelles	Same as above for the French speaking region.
Association Nationale Autisme-Europe 84 route de Mont 5180 Godinne	Vlaame Verenigning Autisme Groot Begynhof, 20 9100 Gent
Association de Parents d'Infants Psychotiques et Autistiques (APEPA) Ave. du Capricorne 1a 1200 Bruxelles	

RESEARCH

Research on various aspects of mental retardation is carried on in all universities (Brussels, Louvain, Ghent, Liege, Mons, Antwerp) but there is no research institute with a major interest in mental retardation.

PUBLICATIONS

The Association Nationale d'Aide aux Handicapés Mentaux publishes a quarterly, Amentia, with separate issues in French and Dutch (Flemish). There is no Belgian professional journal specifically on mental retardation.

Directories - The Ministries of the French and Flemish Communities issue a stencilled list of institutions, hostels and day centers. The Fund for Social Rehabilitation of the Handicapped (Ministry of Labour) issues a stencilled list of sheltered workshops. The Ministry of Education issues irregularly a stencilled list of special schools and special classes.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Early Case Finding can be done through the well baby clinics of the "Oeuvre Nationale de l'Enfance", which serves over 80% of all newborns. The program of PKU detection with the Guthrie test is well developed; at least 95% of all newborn babies are tested. At least 50% of all newborn babies are tested for hypothyroidism.

Diagnosis and Assessment - There is a fairly good number of clinics for psychological assessment. Multidisciplinary diagnostic clinics are available at the University Hospital in Brussels and Louvain University (Department of Pediatrics of the K.U.L.), also, the medical diagnostic clinic at the department of pediatric neurology of the U.C.L., (Louvain).

Genetic counseling - Centres de Genetique Humaine:

Institut Bunge
Philip Williotstraat, Berchem
Antwerpen

Service de Génétique
Ecole de santé publique
4, avenue Chapelle aux Champs
1200 Bruxelles

Akademisch Ziekenhuis
De Pintelaan
900 Gent
  Dienst voor Medische Genetika
  Blok 1 - eerste verdieping
  Kinderkliniek

Centre de génétique
246, avenue Churchill
1180 Bruxelles

Centrum voor Menselijke
Erfelijkheid
Minderbroederstraat, 12
3000 Leuven

Dr. Koulischer
Allée des Templiers 29 bis
6270 Loverval

Dr. Paul Dodinval
Service de Génétique
40, Quai Kurth, 4020 Liége

Education - The network of separate, special day schools for children who are mildly, moderately and severely retarded now is fairly good. A great many children are still educated in private residential schools, but the State pays the salary of one teacher for 12 pupils; tuition is free. A shortage of trained personnel still exists. There are two school systems, the official one and the Catholic one (state supported), plus a very few other private schools.

Work Training and Employment - There are about 150 vocational training schools but this number is still insufficient. There are now 145 sheltered workshops, either only for mentally retarded persons or for both physically and mentally handicapped persons. The first sheltered workshop for the retarded was created in 1960. Some special provision exists for the job placement of mildly retarded people.

Medical Care - The great majority of mentally retarded persons use the same medical facilities as the other children and adults.

Day Centers - There are a few day centers for profoundly or severely multiply handicapped children, and 95 day centers for adults unable to work in sheltered workshops.

Residential Care - There are 100 residential institutions for children, primarily small (rarely exceeding 300 beds), many being boarding schools for mildly retarded children. Some are under provincial authorities but most are private, a large number run by religious orders. The State pays boarding costs and teachers' salaries and 60% of building costs. There are 299 residential hostels and small institutions for adults, but some 2,000 adults are being taken care of in the general psychiatric institutions. For the adults, the State pays 80% of building costs and the boarding costs.

Financial Assistance - increased family allowance to families with a handicapped child; financial State assistance for boarding in institutions; schooling fees; compulsory wages in sheltered workshops (92 B.F. per hr. - state financial assistance is given for this purpose to the workshops); invalidity pension for adults.

Recreation - Leisure time programs have been developed under the impetus of the parent association. There are clubs for retarded men and women, scouting for retarded children, day camps during the summer vacation, and summer camps even for very severely and profoundly retarded children.

Personnel Training - There is still a shortage of persons with specialized training in mental handicap in almost all professions, especially among teaching staff. However, most "educateurs" (care workers) have a three year training preparation.

Research - There are only small programs primarily carried on by individual scientists in the universities including, in the biochemical field, work on metabolic disorders at the University of Louvain, Ghent, Brussels and Liege. The Human Genetics Centers listed above are also concerned with research. Dr. L. Van Bogaert's work at the Institute Bunge has made Antwerp an international center for neurological research. There is research in mental retardation in the Department of Orthopedagogy, University of Mons and Louvain (K.U.L.), and research in the Department of Pediatric Neurology at the University of Louvain (U.C.L.).

OTHER INFORMATION FOR VISITORS

Information can be requested from the Ministry of Foreign Affairs - (Ministère des Affaires Etrangères, 2, rue des Quatre-Bras, Bruxelles 1) and from the National Association for the Mentally Handicapped.

School Holidays - December 23 through January 3; generally one week before and one week after Easter; July and August.

BRAZIL

Brazil is the largest nation in South America in population (about 135 million) and in area. The basic ethnic group is Portuguese, with important and largely assimilated African and some American Indian components. During this century there has been considerable immigration, chiefly to the central and southern regions, from Italy, Spain, Germany and Japan. Brazil is a country of striking contrasts between the metropolitan areas of São Paulo (more than 10 million inhabitants) and Rio de Janeiro (6 million) and the arid areas of the northeast, with one-third of the country's population living in extreme deprivation.

Brazil's social security program is administered by the Ministry of Social Welfare through the National Social Welfare Institute. Coverage for old age, invalidity, death, sickness and maternity is set up under a unified system for all types of workers. Family allowances are to some extent provided through an employment-related system. Primary education is free and compulsory and is a state, rather than a federal responsibility. Consequently, arrangements for special education vary from state to state.

The movement in favor of the mentally retarded began 50 years ago with the foundation of the first Pestalozzi Society, concerned with education of all handicapped children. In 1954, the first local Association of Parents and Friends of the Exceptional (APAE) was founded in Rio de Janeiro, followed by others throughout Brazil, now 600 in number.

Laws passed between 1961 and 1971 defined the rights and services for persons with mental retardation to be carried out by the states, emphasizing special education planning and implementation. A National Center, CENESP, was established in 1974 to coordinate organizational and curriculum planning and to stimulate training of teachers for all areas of exceptionality.

A decree of October 1986 organized CORDE - Coordinação para Integração das Pessoas Deficientes, directly under supervision of the Presidency, and a month later, a Secretaria de Educação Especial - SESPE - replaced the National Center, CENESP, having fuller powers.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministério de Educação e Cultura
Secretaría de Educação Especial (SESPE)
Esplanada dos Ministérios
Bloco "L¯" -6º andar
70.047 - Brasília - DF

and

Ministry of Education and Culture
Secretariat for Special Education
Rua da Imprensa, 16
sala 1510 - Centro
20.030 - Rio de Janeiro

Ministério da Saúde
Secretaría Nacional de Saúde
Divisão Nacional de Educação Sanitaria
Esplanada dos Ministérios
Bloco 11, 8º Brasilia D.F.

Ministry of Health
National Secretary of Health
National Division for Health Education

Divisâo Nacional de Saúde Mental Av. Pasteur, 296 Rio de Janeiro, RJ	National Division for Mental Health
Ministério da Previdência Social Instituto Nacional de Previdência Social Esplanada dos Ministérios Bloco "U" - 4º andar Brasília - DF	Ministry of Social Welfare National Institute for Social Welfare
Fundaçâo Nacional do Bem-Estar do Menor Rua Visconde de Inhaúma, 38 Rio de Janeiro, RJ	National Foundation for Child Welfare

Planning and Coordination

Coordenação para Intregração das Pessoas Deficientes - CORDE Rua Marechal Floriano, 196 Terréo - Centro Palácio Itamarati, Rio de Janeiro	Coordination for the Integration of Handicapped Persons
Secretaría de Educaçâo Especial (SESPE) (see address above)	National Center for Special Education

On the State level, similar agencies, in cooperation with the education authority (Secretaria de Educaçao) are concerned with planning and coordination.

VOLUNTARY ORGANIZATIONS

Primarily Concerned with Mental Retardation

Professional

Associaçâo Brasileira para o Estudo Científico da Deficiência Mental (ABDM) Rua Gustavo Sampaio, 13o andar Rio de Janeiro - RJ	Brazilian Association for Scientific Study of Mental Deficiency

Founded in 1965, one of the early active members of the International Association for the Scientific Study of Mental Deficiency, it provides leadership through publications and its annual multi-disciplinary conference.

Citizen

Federaçâo Nacional das Associaçâoes de Pais e Amigos dos Excepcionais S.D.S. - Ed. Venâncio IV, Cobertura 70302 Brasilia DF	National Federation of Associations for the Exceptional (Mentally Handicapped)

The Federation was organized in 1962 and now unites 600 local and state APAEs; it holds biennial meetings and works closely with the Brazilian Association for the Scientific Study of Mental Deficiency. Since 1966, the Federation has held membership in the International League of Societies for Persons with Mental Handicap, hosting conferences in 1971, 1974, and the 9th World Congress in 1986. Special Olympics, held every other year, have large numbers of participants.

Other Organizations which Include Services to the Mentally Retarded

Federação Nacional das Sociedades Pestalozzi - FENASP Rua Gustavo Sampaio, 676 13o andar - Leme - RJ	National Federation of Pestalozzi Societies

Established in 1970 to combine efforts leading to better care of handicapped people, over 100 Pestalozzi Societies are now members. The Federation's priorities are: technical support to its affiliates, expansion of their assistance to handicapped persons at the national level, adoption of fair policies by the public authroities. The Pestalozzi Society movement has made a significant leadership contribution in the field of exceptional children in providing services, teacher training, and in public information. There is mutual cooperation between the Society and the other organizations concerned with mental retardation. One of its older members is the Sociedade Pestalozzi do Brasil (Rua Visconde de Niteroi, 1450 Rio de Janeiro, RJ).

Associação Brasileira Beneficente de Reabilitaçao (ABBR) Rua Jardin Botânico, 660 Rio de Janeiro - RJ	Brazilian Beneficient Society of Rehabilitation
Associação Brasileira de Neuropsiquiatria Infantil Av. Rebouças, 1205 Sâo Paulo, SP	Brazilian Association of Child Neuropsychiatry

RESEARCH

Secretaría de Educaçâo Especial (SESPE)	Secretariat for Special Education
Instituto de Pesquisa e Preparaçâo de Pessoal na Area da Deficiência Mental (IPPE) Rue Loefgren, 2211 04040 - Sâo Paulo - SP	Institute for Research and Preparation of Personnel in Mental Deficiency

(under the auspices of S. Paulo's APAE and the University of Sâo Paulo)

PUBLICATIONS

Revista da ABDM	Journal of the Brazilian Association for the Scientific Study of Mental Deficiency
Boletim da Sociedade Pestalozzi *Revista Pestalozzi*	Pestalozzi Society Bulletin and Journal

Mensagem da Federaçâo Nacional das APAEs	Message - National Federation of APAEs
Notícias da APAE	APAE's News (APAE de Sâo Paulo)
Desafio de Hoje	Today's Challenge (Rio de Janeiro)

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Case Finding, Diagnosis, Assessment, Consultation to Parents - The Ministry of Health, through the National Service of Mental Health (Serviço Nacional de Saúde Mental) is responsible for several children's psychiatric hospitals and mental health out-patient clinics. The national parents association (APAE) and its branches throughout the country provide extensive parent consultation, as do also the Pestalozzi Societies, State Education Secretariats and private agencies.

Education - Although mentally retarded children have the right to special education, kindergartens and special classes in ordinary schools are largely limited to slow learners and mildly retarded children. Most of the schools for the moderately retarded are funded under voluntary auspices, such as the Pestalozzi Societies, the APAEs, individual educators or physicians, and are mainly in the urban areas. While real progress in providing services has been made in the last decades, both in the public and private sector, the percentage of retarded children receiving education is still insufficient, although growing, indeed it is estimated that perhaps 10% of all Brazilian children are still without schooling, although complete national statistics are not available. Special education survey are available from 1974, '77 and '81.

Work Training and Employment - As yet there has been a limited development of vocational training and sheltered workshop services, although some pioneering facilities are available, e.g. the APAE program is Sao Paulo with its 11 satellite centers. SURSEPS (Vocational Rehabilitation Service, Ministry of Social Welfare) promotes the establishment of facilities for evaluation, counselling, training and sheltered work and placement for disabled persons in general. Primary concern has been with the physically handicapped, but now includes some mentally retarded. A consistent improvement of vocational training and sheltered workshop services has occurred through the expansion of services and training of personnel. In 1987, sponsored by OAS/Organization of American States) with participation of Partners of the Americas (Brazil/ Maryland, USA), SESPE organized an international meeting plus demonstration projects emphasizing work training in small enterprises and rural areas.

Medical Care - Specialized medical services in the area of mental retardation can be found mostly in the more highly developed areas and are increasing. In Sâo Paulo, for example, there is the diagnostic and therapeutic clinic - Clinica de Diagnostico e Terapêutico dos Distúrbios do Disenvolvimento - of the Centro de Habilitaçâo of APAE, and the Pediatrics Department of the Sâo Paulo School of Medicine - Escola Paulista de Medicina (Rua Loefgren, 2249).

Residential Care - Besides the traditional overcrowded wards for the mentally retarded in hospitals for the mentally ill, residential care is provided in a limited number of small boarding schools and homes under private auspices, such as the APAEs, the Pestalozzi Societies and private individuals.

Financial Assistance - Funds have been made available by the Ministry of Education, through CENESP (and now, SESPE) for numerous special and ongoing programs. Other financial support comes from various official agencies of the states and, to a limited extent, the universities (for research). The Federation of APAEs depends primarily on public fund raising; the Brazilian Legion of Assistance (Legiâo Brasileira de Assistência) has been an important source of aid to specific institutions for residential care.

Various Brasilian States have active relationships with U.S. States thorough the rehabilitation and education program of the Partners of the Americas: PATH, Partners in Appropriate Technology for the Handicapped.

Research - A considerable amount of basic and applied research (primarily biomedical) is carried on under university auspices, e.g. a multi-disciplinary study on Down's syndrome by Escola Paulista de Medicina and Sâo Paulo APAE. Other research has been conducted at Sâo Paulo APAE and at Faculdade de Medicina de Botucatú (Universidade de Sâo Paulo). A summary of CENESP supported research in the education and behavioral fields is available.

Personnel Training - On the state level there are specialized training facilities and programs for teachers, both public and private, as well as for psychiatric social workers, recreational supervisors, and other full-time personnel. The Pestalozzi Societies have pioneered in this field and have also prepared teacher training curricula standards for the Ministry of Education. SESPE undertakes the general coordination of personnel training (including personnel to teach at universities, for government planning, and for administration of state services for the mentally retarded, as well as special teachers). CENESP (now SESPE) publishes surveys of teaching and other facilities for mentally retarded and other handicapped children.

The actual trends shown in the Integrated Plan for Special Education suggest that agencies responsible for training, undergraduate and graduate, develop integrated actions with SESU - Secretaria de Edução Superior (Secretariat for Higher Education) and CAPES - Coordenação de Aperfeiçoamento do Ensino Superior (Coordination for Improvement of Higher Education), the latter chiefly for fellowships abroad.

Planning - The governmental agencies are responsible for the planning of educational and care programs for the mentally retarded. The voluntary organizations are active in pressing for extension of services and in providing consultation to official agencies. The actual trends are now for integrated actions with the participation of the various ministries, with the support of CORDE - Coordination for the Integration of Handicapped Persons.

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in planning visits can be directed to: Secretaria de Educaçâo Especial (SESPE); Federaçâo Nacional das Associaçâoes de Pais e Amigos dos Excepcionais; Associaçao Brasileira para o Estudo Científico da Deficiência Mental (ABDM); Sociedade Pestalozzi do Brasil.

School Holidays - During Easter Week, the entire months of December and January until mid-February, and the month of July.

CANADA

Canada (population over 25 million) is a parliamentary confederation of ten provincial governments plus two territories, Yukon and the Northwest, consisting of 40% of the land and about 0.25% of the people. Most Canadians live within 200 miles of the southern boarder; about 44% are of British descent and 30% of French descent, the latter concentrated mainly in the Province of Quebec.

Comprehensive social welfare planning includes compulsory old-age, unemployment, disability and survivors insurance, family and other social allowances, hospital and health care, with responsibility generally shared between the Provinces and the Federal Government.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Department of National Health and Welfare, Ottawa

Department of Employment and Immigration, Ottawa

Each of the 10 Provincial Governments provides services for persons with a mental handicap under such Ministries as:

Community and Social Services, Human Services, or Social Welfare.

The Federal Government provides financial aid to the Provinces but in general does not administer health or welfare services, and has no jurisdiction in the education area, this being the responsibility of the local schoool boards.

National Planning or Coordinating Body - There is no one national governmental planning and coordinating body for mental retardation. However, under the aegis of the Department of National Health and Welfare, there are advisory councils and committees (on mental health, maternal, child health, day care, etc.) which are charged with coordination and planning on the Federal/Provincial level.

The Canadian Association for Community Living, CACL, in many respects, acts as a planning and coordinating body. CACL's provincial divisions likewise coordinate their work with provincial governments. The G. Allan Roeher Institute (formerly, the National Institute on Mental Retardation) shares the CACL headquarters on the York University campus in Downsview (Toronto). The G. Allan Roeher Institute is sponsored by CACL with voluntary and government support; it serves as a central hub for program development, personnel training, public education and research in this field.

A French language institute affiliated with the Quebec Association is located in Montreal.

Institut quebeçois de la déficience mentale
3440 ave. de l'Hôtel de Ville
Montréal, Quèbec, H2X 3B4

VOLUNTARY ORGANIZATIONS

Primary Concern in Mental Retardation

Canadian Association for Community Living, CACL
(until 1986, the Canadian Association for the Mentally Retarded)
Kinsmen Building
4700 Keele Street
Downsview, Ontario M3J 1P3

CACL is a federation of 10 Provincial Associations, each with its own officers, board of directors, professional advisory council and honorary governors. CACL's national officers, directors, professional advisors and honorary governors are drawn from all parts of the country and act for the Provincial Associations in dealing with the Federal Government and other national matters. Approximately 48,000 members (parents of persons with a mental handicap, interested citizens and professional workers) are united in 400 local associations. CACL joined the ILSMH in 1963, and was host/organizer of its Fifth World Congress, held in Montreal, 1972.

Many workers in mental retardation belong to the American Association on Mental Retardation and the Canadian Committee, Council for Exceptional Children, National Education Association (U.S.A.). Canadian scientists represent Canada on the International Association for the Scientific Study of Mental Deficiency.

Other Organizations which Include Mental Retardation

On an informal basis, certain other national organizations include mental retardation in the same way that CACL serves multiple handicaps in its program. These are:

Canadian Council on Social Development
Canadian Committee on Children and Youth
Canadian Mental Health Association
Canadian Rehabilitation Council for the Disabled

RESEARCH

The Department of National Health and Welfare makes available a number of grant funds for research in mental retardation, as do also the Medical Research Council and a number of private foundations. Research relating directly or indirectly to mental retardation is carried out in many universities. Increasing attention is being devoted to psycho-social aspects of mental retardation, in contrast to an earlier concentration on bio-medical areas.

CACL, together with its Provincial Associations and also some of the larger local units, has supported research studies by provision of bursaries to graduate students as well as by direct assistance to research programs.

PUBLICATIONS

Journals

Entourage, bilingual quarterly publication of The G. Allan Roeher Institute and CACL.

Canada's Mental Health, (includes mental retardation), Department of National Health and Welfare, Ottawa

Directories

Individual provinces have, at times, produced directories; many local mental retardation organizations have directories of their own services. CACL keeps information on services but does not publish a formal master document.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents -is provided through the established health, welfare and education services such as mental health clinics, educational diagnostic services and a growing number of specialized centers in most parts of the country. Quantity and quality of services is steadily improving, and more attention is being paid to genetic counselling.

Education - While there is no universal federal legislation which obliges school boards to educate children with special needs, individual provinces are beginning to take steps in this direction. Although the norm continues to be a pattern of segregating, there are many innovative programs demonstrating that when children with handicaps, even those with very challenging needs, are educated in the same classroom as their non-handicapped peers, all the children in the class benefit. Because of the newness and small number of such programs, they are still perceived as experimental, and there are few examples of such system-wide programs.

Work Training and Employment - The last decade has seen a virtual explosion of innovation and thinking in terms of where people with mental handicaps live and go to school. The upbeat mood and general feeling of optimism has not yet penetrated the traditional vocational service systems; they continue to be a living relic of the past, usually condemning people with mental handicaps to years of repetitive and boring piecework in segregated and unstimulating environments.

It must be underlined that the current bleak vocational outlook must be blamed not on problems inherent in the people with mental handicap but rather on the ways in which supports or non-supports have been provided to them.

Technologies have been developed since the 1970s which demonstrate that people with severe and profound impairments are capable of productive activity. Others have demonstrated that people can move directly from sheltered workshops into the workforce with the right kinds of support.

There appear to be two major reasons for the current lack of development in the field of vocational training and employment. First, many of the innovations in the education system are still taking place at the primary level, and few people with mental handicaps are graduating from secondary schools adequately prepared to take their place in the workforce. Secondly, most of the public assistance programmes available to adults who are mentally handicapped are tied to a service model centred around the sheltered workshops. There is little room for experimentation and gradual transition from public assistance to competitive employment because under current structures as soon as a person starts to earn any significant amount of money, even if it is not equal to the full benefits received under social assistance, those social assistance benefits are withdrawn. This has made service deliverers and families hesitant about jeopardizing existing supports when future job security is not guaranteed.

There is beginning evidence of significant discomfort amongst parents, advocates and service providers with the segregated workshops as the prime options for young adults who lived the beginning of their lives as full members of the communities and who expect to be able to continue this pattern in their adult lives. Whilst still not as strong and clearly defined as the lobby for better family support services and better educational opportunities, the lobby for change at the vocational and employment levels is growing. One can predict that the present segregated social welfare models of work will come under increasing attack and public scrutiny in the next few years.

Medical Care - Canada maintains a high quality public health service. There is a universal hospital and medical care insurance scheme backed by Government funds. While increasing attention and concern is evident within the medical profession, especially among the more recent graduates, it is difficult to determine the level of medical care and counselling which parents receive from doctors and public health nurses, particularly in smaller centers.

Living Outside the Natural Family - Many people with mental handicaps live independently and integrate into the mainstream of society. Some live in segregated facilities in groups of eight or more, while others live in a variety of funded living arrangements, for example, foster homes for children, apartments and small group homes.

In 1981, there were approximately 24,000 people with a mental handicap living in institutions for 50 or more. There were approximately 5,000 group home places developed between 1971-81.

In general, the institutional model though far from extinct, has been condemned by serious policy-makers, while community-based alternatives have become increasingly feasible and desirable. Fewer and fewer people are deemed by any programmers to require institutions, and in fact a growing number of professionals, policy-makers, families and politicians are beginning to adopt the view that no handicapped person requires an institution; people who have a handicap require varied and flexible degrees of support, and none need to be grouped excessively in order to receive such support.

Financial Assistance - Federal agencies and provincial governments support programs providing services for persons with a mental handicap, although the present level of assistance is still insufficient to enable provision of optimal community-based services. Adults are eligible for disability pensions through national Family Benefits legislation.

Recreation and Leisure - As in other service areas, most recreation and leisure activities for people labelled mentally handicapped were initially developed by local associations for the mentally retarded and began as segregated programs. These included bowling leagues, floor hockey leagues, swimming clubs, dances and summer camps. In the 1970s, with the increased public recognition and willingness to meet the needs of handicapped citizens, many generic recreation agencies and municipal recreation departments assumed the responsibility to provide services for people who are handicapped, but usually these have continued to be segregated programmes. Such recreational opportunities are available in most cities, but a recent survey of Canadian programmes has indicated a dramatic lack of recreational services in rural areas. The Special Olympics programme sponsored by the Kennedy Foundation in the United States and by the Foster Foundation in Canada provides an opportunity for many handicapped people to engage in physical activity and sports and to compete at regional, national and international levels.

However, there is an increased recognition of the need to take a fresh look at recreational programming and overcome the attitudes amongst professionals who have been trained for segregation. Newer models, such as the leisure-buddy programme, which is widely practiced across Canada, provide an opportunity for volunteers to help persons who are handicapped make use of the regular leisure and recreational opportunities in their communities. Similarly, adults who are mentally handicapped are being helped to take responsibility for planning and going on ordinary vacations, within their budgets, while receiving as much, or, as little, support as necessary. Self-advocacy groups, known as People First, have spread widely across Canada and are increasingly influential in changing public attitudes. People First are affiliated with the CACL and are represented on its governing board.

Personnel Training - Most teachers of special classes have had extra training, but it is not a pre-requisite in all the provinces. Many community colleges offer 2-year post-secondary courses which train workers for such areas as early childhood education, recreation, vocational and residential services. Increased opportunities are available for advanced training in mental retardation for doctors, social workers, psychologists, teachers, etc. The G. Allan Roeher Institute offers intensive short-term courses for volunteers, front-line workers and administrators in mental retardation services.

Planning - Extensive long range planning is being carried on in the mental retardation divisions of Provincial governments, in partnership with CACL and its provincial affiliates.

OTHER INFORMATION FOR VISITORS

Inquiries can be directed to the Department of National Health and Welfare in Ottawa, to the provincial government departments, or to the Canadian Association for Community Living. Individuals or groups planning to visit Canada should specify the areas of interest and the time available in order to plan the most appropriate and efficient study tour. Canada's 24-million people are spread over a land area the size of the United States or approximately the size of Europe. Although Canada's Immigration Act is under revision, families with a handicapped dependent may still experience difficulty in entering the country. It is advisable to confer with the Department of Employment and Immigration in Ottawa.

School Holidays - From the end of June to the first Tuesday in September and the usual Easter and Christmas holidays.

CHILE

Chile, stretched along the southwest coast of South America, between the High Andes and the South Pacific, gained independence from Spain in 1817. The population is about 12 million, of Spanish and Indian descent. Santiago, the capital, has over 4 million people. Chile was long considered one of the more socially progressive countries in Latin America with social and employment legislation creating diverse social services. Massive rural migration has produced large urban concentrations of marginal populations living in extreme poverty. Basic education is free and compulsory but early school leaving is very high.

Special education goes back to 1852, but the first public school for retarded children was founded in 1928 in Santiago, followed by a gradual development until the 1960s when both public and private initiatives increased. Outstanding among them was the creation, on university level, of training in special education teaching, and on government level, appointment of a commission of experts to coordinate diagnostic study and other questions in the field. In 1976 with the financial support and patronage of the government, the "Corporación de Ayuda al Niño Limitado" (COANIL) was established as a private entity to plan and coordinate services for children with mental retardation.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Educación Pública
Av. Bernardo O'Higgins 1371
Santiago

Ministry of Public Education

Departamento de Educación Especial

Department of Special Education

Sets standards and policies, supervises plans and programs.

Ministerio de Salud

Ministry of Health

Servicio Nacional de Salud
Calle Monjitas 665, Santiago

National Health Services

Sección Materno Infantil
Sección de Recuperación
Sección de Salud Mental

Sections:
Maternal and Child Health
Rehabilitation
Mental Health

Determines policy, plans and programs, assigns resources for services to be carried out by consultation centers and hospitals.

PRIVATE AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Corporación de Ayuda al Niño
Limitado (COANIL)
Julio Prado 1761, Santiago

Association to Aid the Child
with Limitations

In addition to its planning and coordination functions, COANIL provides education about mental retardation to the general public, parent education especially for economic and socially deprived families, and prevention campaigns emphasizing early stimulation for babies and pre-school children. COANIL further promotes diagnostic centers, sheltered workshops and homes for children up to age 18. Member of ILSMH since 1978.

Instituto de Rehabilitación Infantil
Alameda Bernardo O'Higgins N° 4620

Children's Rehabilitation Institute

Centers in Santiago, Valparaiso, Concepción and Antofagasta serve 25,000 children, primarily physically handicapped but including some who are retarded. Supported mainly by annual telethons.

Fundación Leopoldo Donnebaum
Avenida Pedro de Valdivia N° 176
Casilla 3058, Santiago

Leopoldo Donnebaum Foundation

Founded 1961. Educational and vocational services, sheltered work for youths and adults. Member of ILSMH since 1970.

Centro de Educación Especial para
Deficitarios (COOCENDE)
Zaragoza 8050, Santiago

Special Education Center for
Retarded Children

A parents cooperative providing early stimulation, basic education and pre-vocational programs for 40 children since 1969.

Talleres de Adaptación
y Desarrollo (TAD)
Lyon N° 1600, Santiago

Adaptation and Development
Workshops

Created by parents in 1975; trains 72 young people in pastry making, printing, embroidery and gardening.

VOLUNTARY ORGANIZATIONS AND ASSOCIATIONS

Professional

Asociación Nacional de Especialistas
en Educación de Deficientes
Mentales
Universidad Metropolitana de
Ciencias de la Educación
Jose Pedro Alessandri N° 747, Santiago

National Association of Special
Education Teachers of Mentally
Retarded

Promotes study and further training, exchange of experiences.

Parents

Unión Nacional de Padres y Amigos
de Deficientes Mentales (UNPADE)
Reyes Prieto N° 480
Bustamente/Sta. Isabel, Santiago

National Union of Parents and
Friends of the Mentally Retarded

Established in 1982 with a present membership of 4,000 families throughout 10 regions of the country. UNPADE organizes the parents work in prevention and rehabilitation, sensitizes the community and promotes protection of rights of persons who are retarded. Member of ILSMH since 1984.

Asociación de Padres de Autistas (ASPAUT) Miraflores N° 124- 2° Piso, Santiago	Association of Parents of Autistic Persons - Created in 1983
Asociación de Padres de Excepcionales (APAE) Casilla N° 1257, Concepción	Association of Parents of Exceptional Children

Regional Group created in 1982 by parents and friends of retarded children. Member of ILSMH since 1986.

RESEARCH

Universidad Metropolitana de Ciencias de la Educación Departamento de Educación Diferencial José Pedro Alessandri N° 747, Santiago	Metropolitan University of Educational Sciences Department of Special Education
Instituto de Tecnología de los Alimentos (INTA) Departamento de Genética y Prevención Jose Pedro Alessandri N° 5540, Santiago	Technical Institute on Nutrition Department of Genetics and Prevention
Universidad de Chile Departamento de Psiquiatría Infantil Santiago	University of Chile Department of Child Psychiatry

PUBLICATIONS

Revista de COANIL, órgano oficial.

Revista Niño Limitado, del Ministerio de Educación, Centro de Perfeccionamiento, Experimentación e Investigaciones Pedagógicas.

Boletín Informativo, Unión Nacional de Padres y Amigos de Deficientes Mentales (UNPADE) - órgano oficial.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Case finding and diagnostic services are available through the clinics of the National Health Service and through various hospitals as well as educational centers and multidisciplinary teams serving pre-school children. Parent counselling has been provided in these centers and in the special schools.

Education - From the first public school for retarded children opened in 1929, special schools and classes spread gradually, and now children with all degrees from minor learning problems to profound mental retardation are in school, either governmental or private. In 1984, 9,500 children were in 63 special schools, some with kindergartens, depending directly on the Ministry of Education (Special Education Department). 79 Schools with 9,700 children were under the Municipalities, having similar policies and programs but different administration. An additional 88 schools under private auspices but with government financing served 9,160 children. School integration is beginning to spread, especially with younger children, and through special classes in regular schools.

Work Training and Employment - The "Escuela de Recuperación" of the Fundación Donnebaum pioneered in including severely retarded youths in its vocational training and in the use of modern techniques and business-like production in a variety of work areas. There are an increasing number of work training programs but much is still in an experimental stage.

Medical Services - In general, specialized medical care is obtainable only in Santiago. The National Health Service and COANIL are interested in prevention and the care of mothers and infants at risk, which may result in more awareness on the part of general practitioners as to responsibility for prevention and treatment.

Residential Care - Facilities are limited. There are only a few facilities for children or adults under the National Health Service, and a few private homes. COANIL has two children's residential treatment homes. As in most of Latin America, it is expected that handicapped children will be cared for by their families.

Personnel Training - A far reaching contribution of the Fundación Donnebaum has been the impetus it gave to the establishment of a university based teacher training program of high quality, under the direction of the Psychology Department of the University of Chile. The specialized training of (already certified) teachers takes place in a building donated by the Fundación with classroom observation and practice teaching in the adjoining school of the Fundación. About 65 receive training each year.

Research - Epidemiological, clinical and biological research in the field of nutrition and mental retardation have been carried out in the pediatrics departments of the University of Chile and the Catholic University.

OTHER INFORMATION FOR VISITORS

Assistance in planning visits can be requested from:

Corporación de Ayuda al Niño Limitado - COANIL
Julio Prado 1761, Santiago

and from:

Unión Nacional de Padres y Amigos de Deficientes Mentales - UNPADE
Reyes Prieto 480, Santiago.

School Holidays - Schools are closed between December 15th and March 15th. The winter vacation usually occurs during the second and third weeks in July.

CHINA

People's Republic of China

According to 1986 estimates, the Peoples Republic of China has a population of 1.06 billion, with an annual growth rate of 1.4%. The target growth rate of 1% was reached in urban though not rural areas. The work force of 501 million is divided in 66% agriculture, 21% industry, 11% other, 2% unemployed. Two thirds of China is mountainous or semi-desert; one tenth is cultivated. 90% of the people live on one sixth of the land. The administrative subdivisions consist of 21 provinces, 5 autonomous regions and 3 special municipalities.

Education is compulsory for 9 years; the literacy rate is over 70%. The goal of universal elementary school education is set for 1990; 96% were enrolled in 1986. Infant mortality has dropped from 110 to 34 per 1000 live births between 1960 and 1986.

China holds membership in these international organizations: United Nations, International Monetary Fund, the UN Food and Agricultural Organization, UNESCO, WHO, International Red Cross, World Blind Union, World Federation for the Deaf, Rehabilitation International.

ORGANIZATION OF SERVICES

According to Professor Tao Kuo Tai, Professor of Child Mental Health in the Nanjing Medical University, the Chinese definition of mental retardation adopted by the Chinese Medical ASsociation is similar to that promulgated by the World Health Organization, as originally proposed by the Joint Commission on International Aspects of Mental Retardation. It emphasizes that mental retardation comprises both intellectual impairment and impairments in social adaptive behaviour (Tao Kuo Tai, American Journal of Mental Retardation, 93, 193-199, 1988). Chinese authorities still use the former categories of idiot, imbecile and feeble-minded.

Official sources estimate that of the 50.6 million disabled persons in China, some 10 million are mentally handicapped, 17 million are deaf and partially hearing, 7.5 million are physically handicapped, 7.5 million are visually impaired, 1.9 million are mentally ill and 6.7 are multiply handicapped.

GOVERNMENTAL

Ministry of Education
35 Damucanghutong
Xidan, Beijing

State Education Commission
Primary Education Department
Special Education Division

Ministry of Civil Affairs

Ministry of Health

Ministry of Labour and Personnel Administration

VOLUNTARY

China Disabled Persons Federation
172 Xizhimennei Stacet
Beijing

Formerly China Welfare Fund for the Handicapped

Director: Deng Pu Fang (son of Premier Deng Xiao Ping). Deals with all disabilities, including mental retardation.

China Mental Health Association
(no address to hand)

RESEARCH

There is increasing contact between Chinese research workers and those in other countries and some publications in English are now coming available. The research topics which seem to be of high priority include epidemiology, aetiology and inborn errors of metabolism; psychological studies of learning processes.

Contacts have been established with representatives of the following organizations:

Chinese Academy of Science (Prof. Mao Yu-Yan)

Chinese Psychological Society

China Special Education Research Centre, c/o Shanghai Municipal Bureau of Education

Department of Special Education, Beijing Normal University (Prof. Piao Yongxin)

Beijing Medical University, Psychiatry and Psychology Research Institute.

Shanghai Psychiatry and Psychology Research Institute

Nanjing Child Mental Health Research Centre (Prof. Tao Kuo Tai)

Nanjing Special Education Normal College (teacher training)

PUBLICATIONS

Journal of Special Education, Division of Special Education, Central Institute of Educational Science, Beijing.

BRIEF DESCRIPTION OF PROGRAM AREAS

Official interest in disability has developed at a rapid rate, particularly since 1981. Official delegations have visited several countries, including the USA, Scandinavian countries, the United Kingdom. Chinese officials and scientists are also attending more international conferences - eg the World Congress of Rehabilitation International in Tokyo in 1988. In the same year, the first international conference on special education was held in Beijing, opened by Deng Pu Fang, director of the China Disabled Persons Federation and son of the premier, himself a disabled person using a wheelchair as a result of being thrown from a window during the Cultural Revolution. At this conference, figures were given which made it clear that only a small proportion of China's disabled people were reached by services but that it was the intention to reach all, including those in remote rural areas.

A number of specialists from other countries have been invited to take part in seminars and workshops designed to familiarize Chinese staff with methods of education and rehabilitation in other countries. Organizations which have been invited to contribute to Chinese staff development projects include the International League of Societies for Persons with Mental Handicap, Rehabilitation International, Caritas and Interaid. It is likely that these overseas exchanges will in future be coordinated through the International Center for Technical and Economic Exchange (CICETE).

In 1987 the Chinese government made it clear to all Civil Affairs officials that each Province, County and township must become actively involved in providing social services.

The division of responsibility for services is similar to that found in many other countries:

The Ministry of Health plays a major part in case finding and service delivery at local level. Doctors and other health workers have a major responsibility; they tend to be mainly psychiatrists and pediatricians. There is an emphasis on assessment and diagnosis and case management.

The Ministry of Civil Affairs is responsible for most community and residential services. Although the majority of people with mental retardation live in the community with their families, China has a number of large residential institutions. These cater for disabled children of all kinds, especially for those who have been abandoned or whose parents cannot look after them. Some of these institutions provide outreach programmes (eg in 12 districts of Shanghai). Although large, these institutions have high staffing ratios. Some institutions are supported and equipped by international agencies such as UNICEF.

The State Education Commission is responsible for the education of all children, including those with disabilities. It is estimated that 53,000 children attend special schools or classes and that around 15,000 teachers are working in the field of special education. This is a very small proportion of the number of children who need education but the intention is to expand this number.

Special education teacher training courses have been established in Beijing, Shanghai, Huangzhou. Nanjing has a large new special education teacher training college, with sections concerned with visual impairment, hearing impairment and mental retardation. Both initial and inservice training is provided. This college is partly supported and equipped by UNICEF, and there are collaborative links with Universities of Oslo and Manchester, UK.

The Ministry of Labour is developing policies to ensure the fullest possible access of disabled persons to work. Precise figures are not available. Sheltered workshops have been set up for disabled person - eg especially for sensorily and physically impaired workers. It is claimed that almost all of the 25,000 persons with some working ability have been given employment in Beijing.

The first Special Olympics held in China took place in 1987, organized by the Ministry of Civil Affairs, the Ministry of Education and the Sports Commission.

FURTHER INFORMATION FOR VISITORS

International Center for Technical and Economic Exchange (CICETE)

State Education Commission

China Disabled Persons Federation

CHINA

Republic of China/Taiwan

Taiwan, the seat of the Government of the Republic of China since 1949, is an island located 90 miles off the southeast coast of mainland China. A range of mountains forms the backbone of the island of Taiwan (Formosa), the western slope being fertile and well cultivated. The economy is based on agriculture, forestry and much light industry.

Partly due to the mass influx of population from mainland China around 1950, as well as the high birth rate and reduced infant mortality rate, the population has doubled in the last 35 years to about 19.5 million. Some are believed to be descended from tribes that migrated from the Philippines; most have come over the past 300 years from mainland China, and nearly every Chinese dialect is represented. The capital city is Taipei, near the northern tip of the island, with a population of nearly 1.5 million people.

Since 1975, both primary and secondary school programs for children with mental retardation, as well as vocational training, residential care and research projects, have grown significantly.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Chiau-yu Pu 5, South Chung Shan Road Taipei 10040	Ministry of Education
Kuo-min Chiau-yu Shi	Department of Elementary Education
Chung-ten Chiau-yu Shi	Department of Secondary Education
Sho-hoi Chiau-yu Shi	Department of Social Education
Bureau of Social Affairs Taipei City Government 39 Changan West Road, Taipei	Coordinates and provides services.

Other agencies with primary concern in mental retardation:

Taipei Children's Mental Health Center
Department of Neurology and Psychiatry
National Taiwan University Hospital
No. 1, Chang-Te Street, Taipei 10210

Taipei Municipal Yang-Ming
Rehabilitation Center for the
Mentally Retarded
2, Juang-Ding Road
Sih-Lin District, Taipei

Tainan Day Care Center
for Mentally Retarded Children
1, Chun-Cheng Road, Tainan

Taiwan Provincial Tainan Institute
for Mentally Retarded Adults
68, Hou-kuo Village, Hou-Bi Shiang
Tainan Hsien

Nontou Institute for Mentally Retarded
16, Lane 1776, Chung-Cheng Road
Tsao-Twen Town, Nantou Hsien

VOLUNTARY CITIZEN ORGANIZATIONS

There are approximately forty private groups devoted to services for persons with mental retardation. For example:

Yang-Ming Training and Rehabilitation Center
of Taipei Association of Mental Retardation
18, Lane 209, Kung-Kwan Road, Bai-to District, Taipei

R.O.C. Association of Mental Retardation and
The First Children's Development Center
17-7, Alley 342, Lane 150, Section 5
Shin-Yu Road, Taipei

Yu-Jen Vocational Training Center for Mentally Retarded Youth
Floor 4, No. 41, Leou-Chou Street, Taipei

Christian Salvation Army Child Developmental Center
139, Alley 139, Lane 432, Wu-Shing Street, Taipei

Benevolent Institute for Retarded and Handicapped Children
51, Shai-Yuan Road, Shin-Chu City

Catholic Center for Retarded Children
20, Chung-Cheng Road, To-Wu Shiang, Maw-li

Others which include services for mentally retarded persons

R.O.C. Association of Special Education
c/o Special Education Center
College of Education
National Taiwan Normal University, Taipei

Shelter Workshop for Mentally Retarded
c/o Hon Chia Electric Co. Ltd.
9, Shin-Ho Road, Tainan City

Taichung Community Mental Health Center
199, Section 1, San-Ming Road
Taichung City

RESEARCH

There are fourteen agencies devoted to mental retardation research, training and education. Two leading programs are:

Graduate Institute of Education
National Taiwan Normal University
Roosevelt Rd. Section 5, Taipei

Special Education Center
National Taiwan Normal University
Ho-Ping East Rd., Taipei

PUBLICATIONS

Growing in Wisdom: The Mentally Retarded Person in Asia, Proceedings of the 7th Asian Conference, Asian Federation for Persons with Mental Retardation, held in Taipei, November 1985. It includes extensive information about services in Taiwan as well as in other member countries of the Federation.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents - Starting in 1960, in-service training has been carried on to equip classroom teachers, public health and mother-child health workers with knowledge and skills in case finding and help to parents.

Education - The first special class for mentally retarded children at the primary level was initiated in a public elementary school in 1962. The first at the secondary level was established in 1970. The total number of special classes for the mentally retarded at the primary level is 557; at the secondary level now 256. Plans are being made to increase the number of classes every year. The first special school for mentally retarded children was established in Kao-Hsiung for children age from six to twelve IQ level under 50.

Sixteen major educational acts and statutes passed between 1968 and 1988 have made significant contributions to the development of special education programs in the country.

Medical Care - Retarded persons receive medical care from their family physicians or from public health programs in the community.

Personnel Training - The provincial Taipei Normal College offers 1-year full-time training programs for teachers of classes for mentally retarded pupils at the primary level. The Graduate Institute of Education and the Special Education Center at the National Taiwan Normal University offer pre-service or in-service training programs for teachers of classes at the secondary level, as does the Department of Special Education at Taiwan Provincial Changhwa College.

Research - Staff members of the Departments of Education, Psychology and Psychiatry of universities have been publishing their research studies on mental retardation in such journals as the Chinese Journal of Psychological Testing, Chinese Journal of Guidance, and Acta Pediatrica Sinica.

Residential Care - The majority of residential centers for moderately and profoundly retarded persons are run by private organizations. Three are located in the northern part, two in the central part, and one in the southern part of the island. In addition, there are three supported by government.

Work Training and Employment - Good-will Industries and day care programs offer work training; classes for mentally retarded adolescents at the secondary school level also offer vocational training.

OTHER INFORMATION FOR VISITORS

Requests for information may be directed to the Ministry of Education or the Bureau of Social Affairs.

School Holidays - The school system is quite similar to the U.S.A. The first semester begins in September and ends in January, and the second semester begins toward the end of February and terminates in early July.

CURAÇAO

(Netherlands Antilles)

Located in the West Indies, Curaçao is the largest of the islands forming the Netherlands Antilles and politically is a part of the Kingdom of The Netherlands. Development of comprehensive services for persons with mental retardation is the responsibility of several major governmental and private groups.

AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Department of Health Sub-division: A.G.V.= Afdeling Geestelijke Volksgezondheid Rembrandtstraat 1 Curaçao, N.A.	Department for Public Mental Health
Early Stimulation Programme School Guidance and Counselling Service Baai Macolaweg z/n Curaçao, N.A.	
Department of Education Schouwburgweg z/n Curaçao, N.A.	Responsible for the special schools
Department of Social Affairs Schouwburgweg z/n Curaçao, N.A.	Subsidizes mental retardation services
Department of Labor - Arbeidszorg Sociale Werkplaatsen Penstraat 322 Curaçao, N.A.	Responsible for sheltered employment

VOLUNTARY ORGANIZATIONS

Citizen

Totolika Association of Parents and Friends of
Persons with Mental Handicap
P.O.B. 3688
Curaçao, N.A.

The coordination in the field of mental retardation is done by the private organization, Totolika, Association of Parents and Friends of Persons with Mental Handicap, in close collaboration with the above mentioned public services. It is a member of the Caribbean Association for Mental Retardation and Other Developmental Disabilities, and has hosted two of CAMROD's biannual conferences. In 1986 it became affiliated with the International League of

Societies for Persons with Mental Handicap; relations are maintained with its counterpart organization in The Netherlands. Its journal Totolika is published quarterly in three languages.

Foundation for the Care for Persons with a Mental Handicap Christinalaan 11 Curaçao, N.A.	Responsible for the management of services subsidized by government.

Other voluntary organizations including mental retardation

Foundation for Vocational Rehabilitation
P.O.B. 3688, Curaçao, N.A.

Curaçao Council for Handicapped Persons
P.O.B. 4001, Curaçao, N.A.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis Assessment, Consultation with Parents - Case finding is done by the baby clinics, using the Denver Developmental Screening Questionnaire. Diagnosis, assessment and consultation to parents is provided by the School Guidance and Counselling Service. The goal of the service is placement in early stimulation programmes and special schools if appropriate. The A.G.V. (Mental Health Department) also provides assessment and consultation, (especially with children having behavioral problems), using play therapy and family therapy.

Education - There are 8 schools for the mildly retarded and 3 schools for the severely retarded. Responsibility is placed with the Department of Education and the Roman Catholic School Board - Huize Scherpenheuvel, Curaçao, N.A.

Work Training - A privately run vocational training center (P.O. Box 3688) has recently been opened. A social (sheltered) workshop employs handicapped adults including some with mental retardation.

Medical Care is the same for all citizens.

Residential Care (Private) - One group home for 18 citizens with mental retardation, Huize Jos Wouter.

Other Services - A Day Care Centre for Children from 3-18 years has a capacity of 48 children with mental retardation.

Volunteer project: 70 persons are entertained on a weekly basis by volunteers, coordinated by a full-time expert.

Financial Assistance - All services are subsidized by government.

Recreation - The Parent's Association provides for some leisure time programs:

Weekly; swimming lessons for a small group of adults, judo for a small group of children, a discussion-group of adolescents with mental retardation held by 3 volunteer leaders.

Yearly; special celebrations for St. Nicholas Day, Christmas, Carnival and a Sports Day, summer camping, a Family Day and a Talent Show.

OTHER INFORMATION FOR VISITORS

Visits can be coordinated by tthe A.G.V. and the School Guidance and Counselling Service, if officially requestted several months in advance. The petition with copies to the A.G.V. and Schoool Guidance and Counselling Services, should be addressed to:

The Deputy Director of Educatiion and/or Health
Besturrskantoor
Concordiastraat
Curaçao, N.A.

School Holiday Periods - Christtmas: usually from December 23rd to January 2nd; Carnival: 2 days; Easter Holidaay: Good Friday and one week after Easter; Summer Holiday: 6 weeks, beginning of July till mid-August.

CZECHOSLOVAKIA

(C S S R)

The Czechoslovak Socialist Republic lies in the center of Europe, with a population of 15.6 million. It has been a federative socialist republic since 1948 composed of 2 Slav nations, the Czechs (65%) and the Slovaks (29%), Hungarian and other people making up the remainder. The official languages are Czech and Slovak. Administrative functions of government are carried out through a system of "national committees" on a regional, district and local level, districts having about 100-200 thousand inhabitants and regions around a million. There is an extensive social security program, and health and rehabilitation services are widely developed. School is compulsory, from ages 6 to 15; the university system had its beginning in 1348.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministerstvo zdravotnictvi — Ministry of Health
tr. Wilhelma Piecka 98
Praha 10 - Vinohrady

In charge of psychiatric, child-psychiatric and general health out-and in-patient care for the mentally retarded.

Ministerstvo skolstvi — Ministry of Education
Karmelitská 7
Praha 1 - Malá Strana

In charge of special education for the "educable" mentally retarded. (This term includes many moderately as well as mildly retarded children.)

Ministerstvo práce a sociálnich veci — Ministry of Labor and Social Affairs
Palackého nábrezi 4
Praha 2 - Nové Mesto

In charge of facilities for severely mentally retarded and of social problems of all mentally retarded individuals.

VOLUNTARY ORGANIZATIONS

Concerned Primarily with Mental Retardation

Sdruzeni pro pomoc mentálne postizenym (SPMP) — (Association for Aid to the Mentally Handicapped)
Jindrisská 14, 111 21 Praha 1

Registered in 1969, this Czech organization is composed of parents and concerned professional workers. It has branches in different regions of the country and holds annual conferences, often in cooperation with the special education bodies and with its Slovak counterpart.

Zdruzenie pre pomoc mentálne postihnutym pri Spolocnosti liecebnej a speciálnej vychovy v SSR Svrcia 6, 842 11 Bratislava	The Slovak Association for Aid to the Mentally Handicapped

This "sister" organization was founded in 1981 as the 8th Section of the Society of Curative and Special Education in the Slovak Socialist Republic.

Other

Ceskoslovensky cerveny kriz Thunovská 18 Praha 1 - Malá	Czechoslovak Red Cross Helps in recreation and leisure time programs.
Federace Ceskoslovenskych Invalidu Karlinské Námestí Cís 12 Praha 8	Czechoslovak Society for Rehabilitation - Particularly interested in cerebral palsy.

RESEARCH

Research on various aspects of mental retardation is included in specific and general state planning and is realized in competent research institutes and also in special facilities for the mentally retarded.

PUBLICATIONS

There is no Czechoslovak professional journal specifically on mental retardation. Articles on mental retardation are published from time to time in medical, pedagogical and social affairs journals.

Medical: Cs. Psychiatrie
Cs. Pediatrie
Activitas Nervosa Superior

Pedagogical and psychological: Otázky defektologie
Speciální pedagogika
Cs. Psychologie

Social Affairs: Sociální zabezpecení
Sociologicky casopis

The Association SPMP publishes a journal "Informace."

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Obligatory prenatal care serves practically all pregnant women and there is obligatory medical care for newborns and infants, as for all children. Early case finding in general takes place in pediatric facilities, later in school and adolescents' health services which are free for all children and adolescents. For more complete examination for purposes of diagnosis, treatment and assessment (from the medical, psychiatric, psychological, social and often pedagogical point of view) children are sent to child psychiatric out- (or in-)

patient clinics. Biochemical and chromosomal examinations are available in pediatric clinics of medical facilities. Pedagogical diagnosis is also made in special children's observation homes. Diagnosis of social adjustment of moderate and severely retarded individuals is made in the regional special consultation centers under the social affairs administration.

Education - The education of mildly retarded children is insured by the network of separate day and boarding special schools. There are also some special classes in ordinary schools. Nearly 2 to 2 1/2% of all children attend special schools or special classes; the provisions for children designated handicapped (for any reason) more than doubled between 1958 and 1978.

Since 1970 a new conception of special schools has been developed. The obligatory special education begins for 3 to 6 year olds in special kindergartens, and may last up to 16 years of age. Special schools are divided into 2 types -- for the mildly retarded-borderline and for the mildly-moderately retarded.

The more moderately and severely retarded children are educated in day facilities and in residential institutions under the social affairs administration. Institutions for children 3 to 12 years are for boys and girls together, while those for 13 to 25 year olds are gender specific.

Work Training and Employment - Young people with mentally retardation are designated by the special district commissions attached to the school authority (teachers, specially trained educators, psychologists, social workers, child psychiatrists and/or other physicians) as "persons with lessened working ability" and entitled to have special protection. Such a person has preference of employment in selected working places, although there is still a shortage of special sheltered workshops. A number of apprentice boarding schools provide work-training courses of one to 3 years for 15 to 18 year olds, and jobs in open employment are generally available for these young people.

Medical Care - General medical care is ensured in pediatric health centers as for other children. Special care is provided for those in child psychiatric and other special facilities.

Residential Care - Most retarded children and young adults live with their parents. Residential service for children in need of care away from home may be provided in psychiatric hospitals for children or in children's wards of psychiatric hospitals.

Residential care for "educable" children, if indicated, is ensured in special boarding schools; the more severely retarded are in institutions under the social affairs authorities which are also responsible for separate homes for severely retarded men and women over the age of 25.

Financial Assistance - Increased family allowance is provided for families with a handicapped child. Financial assistance is given by the state for the care of children in residential institutions of the Ministry of Education and of the Ministry of Labor and Social Affairs. The care of institutions of the Ministry of Health is entirely free as is all out-patient care including medication. Adults aged 26 or older who cannot be employed receive invalidity pensions through the National Social Security Office.

Recreation - Programs for recreation are assisted by the Czechoslovak Red Cross and are an important part of the program of the voluntary parents' organizations.

Research - Besides medical and biological investigations, research is oriented especially toward new forms of organization of education and toward social problems of people labeled mentally retarded.

Personnel Training - The training of special teachers is given in the pedagogical faculty of universities in the form of postgraduate study for teachers of ordinary schools. The interest of teachers for this study is fairly high. There is also special interest and training in speech development, occupational and physical therapy.

OTHER INFORMATION FOR VISITORS

This can be requested from foreign affairs departments of the responsible Ministries or from the Department of Special Education of the Pedagogical Research Institute - Mikulandská 5., Praha 1 - Nové Mesto.

School Holidays - July and August.

DENMARK

Denmark is a constitutional monarchy with a mainly homogeneous population of 5 million (not including the Faroe Islands and Greenland). It is a social welfare state which assumes major responsibility for the education, health and welfare of all its citizens. Elementary education has been compulsory for more than 150 years; more than half the population receives some kind of secondary education, many through evening courses and the Folk High Schools.

Services for persons with mental handicap were started in 1855 with a boarding school for 15 children. A few years later the optimistic view that mentally handicapped children could be "cured" by education and physical training was given up, and a private custodial care system developed, supported by the state. The country was to a greater extent than others covered by large residential facilities. This "put away" policy was based on the idea of protectionism with laws on confinement of people, sterilization, prohibition against marriage between persons with mental handicap, etc.

In 1952 a national parents association was founded. Acting as a political pressure group, it succeeded in having a government committee set up (1954) to prepare completely new legislation based on the principle of normalization, i.e. to create normal living conditions for people with mental handicap. In 1959 a special law was adopted under the Ministry of Social Welfare which gave responsibility to a new State Mental Retardation Service, functioning through 12 regions, directed by N.E. Bank-Nikkelsen (who had been appointed secretary of the legislative committee in 1954). Mandatory education for all children was introduced but took more than a decade to implement. All services, with few exceptions, became voluntary, and modern institutions with small units were built, becoming a model for visitors from many countries. But by the 1970s reduction of the large institutions had started; hostels were established in close cooperation with the parents' organization which temporarily financed the buildings; soon other forms of living in the community were being used, such as smaller group homes and apartments.

Implementation of the principles of normalization, integration and especially, belief in equality of rights, had led to basic social reform legislation, the Social Assistance Act (passed in 1970 to take effect in 1980), which decentralized all services for elderly and disabled people, children and other marginal groups in society. Service is to be given according to the need of the individual regardless of the origin of the need. Responsibility was delegated from the national government to the regional and local authorities (16 counties and 275 municipalities) making them directly responsible for help to all citizens in their respective field of services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Socialministeriet Slotsholmsgade 6 1216 Copenhagen K.	Ministry of Social Affairs
Socialstyrelsen Kristineberg 6, Postbox 2555 21000 Copenhagen Ø.	National Board of Social Welfare

Undervisningsministeriet

Ministry of Education

Specialundervisningen
Frederiksholms Kanal 25 D
1220 Copenhagen K.

Special Education

National Planning and Coordination

Det Centrale Handicapråd
Socialstyrelsen
Kristineberg 6
2100 Copenhagen Ø.

National Council for the
Handicapped

VOLUNTARY ORGANIZATIONS

Citizen

Landsforeningen Evnesvages Vel (LEV)
Spaniensgade 15
2300 Copenhagen S.

National Society for
the Mentally Retarded

The national parents organization was started in 1952 and initiated the request for a study commission which led to the 1959 legislation based on goals to become known as the Normalization Principle. In 1960 LEV was a founding member of the International League of Societies for Persons with Mental Handicap. Always deeply involved in improving the life situation of all retarded children and adults, LEV worked closely with the national Mental Retardation Service during its pioneering years of the 1960s and '70s, and since 1980, cooperates with and monitors the county and local councils which now carry the direct service responsibility. The boards of directors of LEV's 16 branches support the interests of people with mental retardation and their families in negotiations with the 16 county and the municipal councils, financially and consultatively, in making it possible for retarded people to live in houses and apartments among other people, and to receive the needed practical assistance to compensate for their handicap. Believing that "the most important technical aid for a mentally retarded person is another human being," LEV has been strong for abolishing the large institutions in favor of living in the community. LEV's program gives equal importance to the need for support to parents, giving them (and also the county and municipal staff) information and guidance on the needs of retarded children and adults, not forgetting the special problems and tasks of the families involved. Finally, LEV continues to keep the general public informed and interested.

Professional

Dansk Selskab for Oligofrenologiforskning
c/o Institut for psykiatrisk demografi
Statshopitalet ved Arhus
8240 Riisskov

Danish Society for Research
in Mental Deficiency

Members of this group were involved in founding the International Association for the Scientific Study of Mental Deficiency, which had its beginning during the Copenhagen Congress on the Scientific Study of Mental Retardation in 1964.

RESEARCH

John F. Kennedy Instituttet Gammel Landevej 7-9 2600 Glostrup	John F. Kennedy Research Institute
Universitetets Arvebiologiske Institut Tagensvej 14 2200 Copenhagen N.	University Institute of Human Genetics
Socialforskning Instituttet Borgergade 28, 1300 Copenhagen K.	Institute for Social Research

PUBLICATIONS

LEV Spaniensgade 15 2300 Copenhagen S.	Monthly publication of the National Society for the Mentally Retarded

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents - The aim of services for handicapped persons is to help them live a life as close to normal as possible. From the first stage of life early stimulation is given. An Act against sickness and mortality of infants in their first year was passed in 1937 as the first of a series of preventive laws. The health of infants is regularly checked in their homes by visiting public health nurses. A later Act provides for 9 free preventive medical examinations of infants from birth to school age (7 years) when health control is taken over by the school doctor attached to each school, who carries out regular examinations. Any departure from normal development is reported to the family doctor, who provides the required treatment. Preventive work is, for the most part, the responsibility of the general practitioner who plays an important role in the Danish health system. While an important function of the parent association is to provide consultation and mutual aid, time is still sometimes lost in reaching "new" parents.

Education - Up to World War II three large boarding schools (totaling 500 places) had been available for pupils who were, in the language of that time, debiles. After the war about 75 small special day schools were built all over the country. By and by the clientele of these schools changed from mildly and moderately retarded to severely and profoundly retarded children. The mildly and moderately retarded children were gradually integrated in the ordinary school system. Special schools were under the administrative control of the Ministry of Social Affairs, and the regulations were part of the special law on services for the retarded (1959).

In the social reform of 1980, all responsibility for education was transferred to the Ministry of Education. In addition to the nine years of compulsory education in the primary and lower secondary schools, all children age 5 to 7 years are entitled to one year in pre-school class, and later to continue in a tenth school year. During this entire course the school has to provide special instruction and assistance for pupils whose development requires special support.

The local authorities are to provide the ordinary special instruction, while the county authorities are responsible for instruction if it is of an extensive nature. Pupils with severe handicaps have a special right to eleven years of schooling.

Special Instruction for Adults - Since 1980 the special instruction which physically or mentally handicapped persons need, to relieve or limit the effect of their handicap, is provided by the county authorities either by organizing special instruction in schools, institutions and homes or by financing privately organized instruction along the lines applying to leisure-time education. Instruction may be provided in workshops or, as other kinds of adult education, in the evening schools of the municipality. A main emphasis throughout the education of mentally retarded people is to help them acquire skills in daily living and preparation for future independent living.

Work Training and Employment - Persons with a handicap who cannot follow a normal procedure for vocational training, can have support of an advisory, financial or technical nature, either within the regular vocational training system or by providing specific forms of training. The same applies to persons who because of a handicap are unable to obtain or keep a normal occupation. They may be offered employment either in a sheltered workshop, usually equipped with modern machines for industrial production, or in a private industry with public support. A considerable number of retarded adults work in open employment.

Residential Services - At the end of the catalogue of services of the Social Assistance Act there is a net of residential accommodation for different groups of handicapped persons and old people who are not able to live on their own, either permanently or for a shorter or longer period. The policy in this field is to make the housing units as small as practically possible and to arrange them with every possible consideration for private life and individual development. The aim is to abolish all large institutions.

Collective housing for handicapped persons can be supported through payment for common facilities and practical assistance as a supplement to the regular practical assistance available to any needy person in the community.

Day Services - are available for handicapped children, either in special day centers, or in regular day centers integrating handicapped children. Adults can be accepted in sheltered workshops or in day centers with training and stimulating activities. Respite facilities are available for children normally living with their parents.

Leisure-time Education and Recreational Activities - Adults with a handicap should be enabled to participate in the leisure-time programs organized by private associations, and for the 14-18 year olds also by the municipalities. Recreation centers, holiday camps, holiday trips are open to all and trips to foreign countries are frequent. Evening recreation, hobby-rooms and the like are available, but people living in the community tend to participate in ordinary community activities, e.g. bike clubs, cinema, sports.

Social Counselling - is provided by the local authorities, by the counties and by a special corps of advisors available for the different groups of handicapped persons and financed by the state.

Medical Care - The Sundhedstyrelsen (National Health Board), a unit of the Ministry of Interior, supervises the implementation of Denmark's broad health legislation, including services to people with disabilities, as well as preventive medical services.

Financial Assistance - The financing of social services is now shared by the state, the counties and the municipalities according to certain formulas. A condition for introducing the new system was that the level of services not be decreased. In fact an increase was allowed and has actually taken place in spite of the economic problems in the present period.

People are helped to live normal lives in the community through the granting of disability pensions, rent subsidies, other economic compensation, technical aids and facilitating employment.

Cash benefits are rendered on an individual basis to families keeping a handicapped child at home to compensate for the extra costs involved. Also handicapped adults can be given compensation for extra costs of living as well as extra costs for their education, vocational training and employment.

Practical assistance in the home is available in all municipalities to help handicapped and old people live a normal life in their own homes. Home help may be granted either for a transitional period or as a permanent help, but it can also be given as an occasional relief for families who have a person with a physical or mental handicap in their home.

Technical aids for disabled and old people are provided usually free of charge, as well as funding for adaptation of a dwelling to fit the needs of a handicapped person.

Research - Traditionally, provision for the care of retarded persons and support to their families has been considered more important than research. However, in the period from 1965 to 1980, the Research Committee of the Mental Retardation Service financed, through a special fund, over 100 research projects on medical, social, educational and other subjects. The scope of the John F. Kennedy Research Institute, originally intended for research on phenylketonuria, was widened to encompass other disorders, including a special section for chromosome research. Other research, directly or indirectly related to mental retardation, is promoted by the Danish Society for the Scientific Study of Oligophrenia and other scientific organizations, including the National Institute of Social Research.

Personnel Training - In 1961 the Mental Retardation Service established a Personnel Training School (Personalehøjskolen - Islands Brygge 83 A., 2300 Copenhagen S.) which annually trained some 400 students as "Care Assistants." (In Denmark, the Care Assistant is the worker with long-term contact with a number of handicapped clients, with overall responsibility for their development and well being.) The 3-year salaried training period was spent in part at the school, in part in practical training in the various types of service facilities. In more recent years a parallel 3-year training course for "Social Care Officers" was started which prepared direct care workers in the field of both the aged and the handicapped; similar courses as well as supplementary courses for senior staff members, social workers, therapists, sheltered workshop personnel, are now available also in a few other schools.

Teachers are required to have passed the Teacher Certificate Examination or certification as kindergarten or recreation teachers, and additional in-service and short course training is provided.

Coordination and Planning - Coordination of the efforts of local and regional authorities according to the 1980 Social Assistance Act is secured by a statutory planning system. Each year all counties and municipalities must develop a detailed plan of their social service system for a four year period and send it for review to the Ministry of Social Affairs. A uniform interpretation of social legislation all over the country is secured by a special appeal system for the social sector, so that under certain conditions decisions taken on local and regional level can be brought before a National Appeal Board.

The National Council for the Handicapped is made up of representatives from the organizations of persons with handicap and from the national, regional and local authorities, plus representatives from other relevant ministries (housing, regional planning, traffic, training/education and employment) since handicap questions are not only the responsibility of the Ministry of Social Affairs but also of other governmental departments. The Council is to follow and assess the social conditions of disabled persons in Denmark. It can be consulted by the Minister of Social Affairs and other public authorities on matters of importance for handicapped persons; it may take initiatives and submit proposals. Corresponding councils are set up on the regional level and may be set up also on the local level.

OTHER INFORMATION FOR VISITORS

The National Board of Social Welfare and the National Society for the Mentally Retarded may be contacted. Det Danske Selskab (Danish Institute for Information) offers short term seminars on social welfare, special education, and other subjects. (2 Kultovet, 1175 Copenhagen K.)

School Holidays - are usually from about 20 June to 20 August. The 3rd week of October is a holiday, as are Christmas and Easter week.

ECUADOR

The Republic of Ecuador lies on the equator with two ranges of the Andes dividing it into three zones, the hot and humid lowland on the Pacific Coast, the temperate highlands, and the rainy, tropical eastern lowlands. The Galapagos Islands are also a part of Ecuador, which is divided into 20 provinces and has a population nearing ten million. Because of its geography, meetings between people of the different areas tend to be somewhat hard to organize.

Primary education is compulsory, with about 80% of primary schools in the rural areas. Literacy is estimated at 75%.

In the present Constitution (Article 27) the State "guarantees the access to education for all inhabitants without any discrimination." The Law for Protection of the Handicapped (1982) defines the help to be provided in areas of medical and psychological assistance, physical and mental rehabilitation, special systems of social security, education, work training, financial subsidies, public transport, specialized personnel training, and information programs for education of the public. Unfortunately, many of these measures have not yet been made effective, but the legal framework exists.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Bienestar Social Robles y Paez, Quito	Ministry of Social Welfare

Dirección Nacional de Rehabilitación Integral del Minusválido (DINARIM)
(National Board for Integral Rehabilitation of the Handicapped)

  Centros Regionales de Rehabilitación Integral del Minusválidos (CRRIM)
  (National System for Integral Rehabilitation of the Handicapped)

Sistema Nacional de Rehabilitación Integral del Minusválido (SINARIM)
(Regional Centres for Integral Rehabilitation of the Handicapped)

Ministerio de Educación y Cultura Mejía y Venezuela, Quito	Ministry of Education and Culture
Dirección Nacional de Educación	National Board of Education
Departamento de Educación Especial	Department of Special Education
Sección de Educación Especial	Special Education Section
Supervisión de Educación Especial	Special Education Supervision
Subsecretaría de Educación	Sub-department of Education
Dirección Provincial de Educación	Provincial Board of Education
Unidades de Educación Especial	Special Education Units

Ministerio de Salud Pública

Institutos de Diagnóstico y
Orientación Psicopedagógica (IDOPS)
(Institutes for Diagnosis and
Psychopedagogical Guidance)
Lizardo García y Hurtado, Guayaquil
Benalcazar 853, Quito

Ministry of Public Health

Hospital Psiquiátrico "Lorenzo
Ponce" (Guayaquil)
Hospital Psiquiátrico de Quito

VOLUNTARY ORGANIZATIONS

Instituto Ecuatoriano del Niño y Familia (INNFA)
Olmedo 953 y Benalcazar, Quito

INNFA is an important organization which includes concern for mental retardation. It is an autonomous, private entity which is sponsored by the government and also by international agencies and organizations. It is managed nationally by the wife of the President of the country, with each INNFA branch presided over by the wife of the governor of the province. The executive director has been Profesora Marcía Gilbert de Babra (founder of the FASINARM programs).

Federación Ecuatoriana pro Atención
a la Persona con Deficiencia Mental
Casilla 719, Dr.Arturo Carpio Rodas, Presidente
Cuenca

This recently established national association of parents, friends and professional workers brings together the longer established societies listed below and others. The Federation became a member of the International League of Societies in 1988.

FASINARM - Fundación a los Niños y
Adolescentes Retardados Mentales
9 de Octubre 1612, Casilla 2080
Guayaquil

APANI -
Casilla 118
Riobamba

ASENIR - Asosiación para Niños
Retardos
Av. de las Américas
Guayaquil

APRONJEL - Asociación de Padres
para Niños y Jóvenes -
Excepcionales de Loja
Casilla 623, Loja

RESEARCH

Departamento de Salud Mental (Department of Mental Health of the Ministry of Public Health).

Departamento de Educación Especial (Ministry of Education and Culture).

Centro de Recursos FASINARM (FASINARM Resource Center).

PUBLICATIONS

Various publications, plus a list of the Special Education Centers which serve the mentally retarded or include this service have been compiled by the Resource Center of FASINARM. This is one of the PATH Centers (Partners Appropriate Technology for the Handicapped) which makes information available regionally, with support from the Partners of the Americas.

Centro de Recursos
FASINARM
P.O. Box 2080, Guayaquil

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Parent Counselling - With some exceptions, there are few programs formed to reach these goals. However, the planning is realized in a very well organized way in the private sector, especially through the action of INNFA, and there is a good beginning of early stimulation programs, both governmental and private.

Education - During the last years there has been an increase of the special education centers and programs, in both the official and private sectors. In the official sector, these centers depend on the Ministry of Education and Culture, the Ministry of Social Welfare and the National Institute for the Child and Family. This growth can be shown in the following figures:

In the year 1977, there were 24 special education centers in the country. In the year 1985, there were 110 special education centers, of which 53 take specific care of the mentally retarded population. In spite of this growth, in respect to the coverage of services, these are still very limited. The number of existing programs are insignificant to attend an important population requiring these services, since only 0.81% of the population benefits from them.

Work, Training and Employment - In the employment and vocational training area, private as well as official, very little initiative is to be observed. In the case of private organizations, the support of North American programs on a technical and financial level should be noted. However, the Fundación Ecuatorian Pro-Rehabilitación del Subnormal Mental is a private organization formed by parents, businessmen and professionals who look for funds to support sheltered workshops for young people who leave special education centers and need to develop work skills necessary for them to be employed in the community. Worthy of note on the official and semi-official level, also, are the programs being developed by the DINARM - Centros Regionales de Rehabilitación Integral del Minusválidos, through its regional branches in Quito (Casillo 4130), Guayaquil (Av. 25 de Julio) and Cuenca (Casilla 1130).

Residential Services - With the exception of a residential institution existing in Quito, there is no knowledge of another, although the concern to establish this type of services is present. For example, within the future aims planned by FASINARM is the creation of a residential home for mentally retarded persons.

Financial Assistance - The private sector finances its operations with many difficulties, with donations from the parents; scholarships from industries, commerce or the banking system, given to pupils with little income; activities such as collections or raffles; complimentary distributions from the Ministries of Education, Welfare and INNFA; and a concession of fiscal assistance for the personnel working in the centers.

There are also rehabilitation scholarships that the Ecuadorean Institute of Social Security (IESS) grants to exceptional children who are sons or daughters of social security recipients.

In respect to the construction and equipment of the centers, the service clubs (Rotary, Lions, etc.) and other international organizations have been of great help.

Recreation - Programs for persons with physical and sensory handicaps have been developed, but not the area of mental retardation. The recreational programs for them are realized on an individual institution level.

Research - In the investigation field, there is no major activity. However, on the private level there is a glimmering of a few attempts to go deeper into related themes, e.g. affected population, beneficiaries, training needs.

Personnel Training - Capable human resources for the development and training of personnel for the special child are dramatically insufficient. There is no definite policy regarding the forming of specialized personnel. Until 1980 there were no more than 25 specialized persons in special education in the country; these had obtained their training in foreign countries. According to estimates for the year 1985, the need for this type of personnel would be 17,626. Actually, there are approximately 150 teachers. During the last years, various national and foreign organizations have helped in obtaining and training personnel, the most relevant being the Organization of American States (OAS), the Fulbright Commission, UNESCO, the U.S. Agency for International Development (AID), Partners of the Americas and the Peace Corps.

Prevention - There are only programs of early stimulation, in the private sector as well as the official. In the area of architectural design, it is worth noting the activity of the Rotary Club in constructing ramps in the sidewalks of the city of Guayaquil, in order to facilitate access for persons with physical handicaps. Some investigations have been realized during the last years by university students regarding accessibility for persons with physical problems.

The legal aspects and policies in special education material are characterized by contributions from multiple sectors (government or autonomous organizations and entities).

OTHER INFORMATION FOR VISITORS

The FASINARM Resource Center is glad to help arrange programs for professional visitors.

School Holidays - School vacations for the coast: February through April, last week of July and 2nd week of October. For the Sierra: July through September, also: Cuenca - first week of November, Quito - first week of December.

EGYPT

The Arab Republic of Egypt is a nearly rainless desert with a population of almost 52 million living in only 4% of the total area, the arable valley and delta of the Nile. With the exception of small minority groups, the Egyptian population is fairly homogeneous, 93% Moslem and 7% Coptic Christian. Arabic is the official language; the capital city is Cairo. Egypt has a recorded history of almost 6,000 years; since 1953 it has been a republic.

Education is compulsory beginning at age 6 and is free through the university level. Since 1952 elementary school attendance has risen from 40% to 90%. In addition to the University of Al-Azhar, historic seat of Moslem learning, there are technical schools, teacher training schools, and 10 modern universities, 5 of them in Cairo. There is a concerted drive to increase the rate of literacy, now about 70-75%, through adult education and community development programs.

As more of the endemic infectious diseases have been brought under control, and elementary school facilities extended, it has been possible to make a substantial start in providing programs for the handicapped, beginning with the blind and physically handicapped and now including children who are mentally retarded, deaf-mute or who have leprosy, cancer, or other diseases.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Social Affairs
Dr. M. El-Banna, Rehabilitation Advisor
Mogama Building, 5th Floor, Room 82
El-Tahrir Square, Cairo

Ministry of Health
Dr. Nayer Katry, Director
Mental Health
Ministry of Health, Cairo

Ministry of Education
Mr. Sobhi Attaila, Undersecretary
Falaky Street, Cairo

NATIONAL PLANNING AND COORDINATING ORGANIZATION

Union of Agencies for Rehabilitation of the Disabled
Dr. Salah Kotb, President
32 Sabri Abou Alam Str., Apt. 22, Cairo

Voluntary and governmental agencies are members of the Union.

VOLUNTARY ORGANIZATIONS

Mataria Society for Intellectual Development
30 Mathaf, El Mataria Street
Mataria, Cairo

Founded in 1965, this semi-governmental organization which now has certain parent involvement, brings together experts from various fields and plays a role in planning and demonstration as well as provision of services.

The Right to Live Association for Mentally Handicapped
58 Nazih Klalifa Street
Helipolis, Cairo

Founded in 1981 by a group of parents and friends of the mentally handicapped. From 1983 to date the Association has established a school for children from 4 to 10 years, a pre-vocational training course, parent counseling, training courses for staff members and interested individuals, a library and a speech therapy center. A bigger center is presently (1986) under construction; it will include a new school of 24 classrooms, another speech therapy center, several sheltered workshops and a residential home for adult handicapped individuals.

The Shouba Association for Mentally Handicapped
23 El Baassa Street
Shouba, Cairo

A recently established group of mothers have started a vocational training program for young adults and also a recreational program for younger children.

Right for All Society
c/o Sr. Etham Kalthoum
College of St. Marc
Alexandria

So far these newer societies are concerned with providing a specific service or centers with various services, but some informal contacts between them are beginning to take place.

PUBLICATIONS

The professional journals which most frequently publish articles on mental retardation are the "Journal of Modern Education" and the "Journal of the Egyptian Association of Mental Health."

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Traditionally in Egypt, as in many countries, the birth of a disabled child has been seen by parents as an act of God which must be accepted and about which nothing could be done. Modernization is bringing changes in attitude so that, while a disabled child is still warmly regarded as a part of the family, action to improve the child's development potential is increasingly recognized as possible and desirable. Diagnosis and assessment services are available in the larger cities in general hospitals and university psychological clinics, faculties of education, charitable institutions, and the vocational training centers of the Ministry of Social Affairs. Also the Society for Intellectual Development is concerned with case finding, diagnosis and assessment, and consultation to parents at its institute at Mataria, as are the other parent sponsored programs.

Education - Since 1956 mildly retarded children (approximate IQ 50-70/75) are liable for compulsory schooling in so far as there are special classes or schools in their locality. Presently, about 4,000 are being served under the special education programs of the Ministry of Education. The Ministry of Social Affairs is responsible for the education and training of nearly 1,500 moderately retarded children and young adults, the majority of whom are in six residential institutions. There are a few private special schools (as the Right to Live School), also a small number of private schools for non-handicapped children in Cairo have classes for children with intellectual disabilities.

Vocational Training - Social and vocational training is emphasized in all facilities, preparing the young people to earn a living in such trades as carpentry, carpet making, ceramics and leatherwork, housecraft, sewing and tailoring. The Mataria Training Center, a day workshop, provides children of all ages and both sexes with advanced training after which they are placed in the community for further training or as regular employees. Other such centers are those at Helwan (13-18 year old girls) and at Zeitoun (13-18 year old boys). Social workers of the Ministry or of other social service organizations are active in helping to find work placement for retarded school-leavers; 1975 legislation raised the percentage of compulsory employment of the physically and mentally handicapped from 2% to 5%.

Medical Care - Health problems of school age children are dealt with by the School Health Service of the Ministry of Health. The Ministry also provides medical help in hospitals, including special sections for severely retarded persons in its mental hospitals.

Residential Care - In addition to the 6 residential schools noted above, the Ministry of Social Affairs is responsible for 2 units for retarded juvenile delinquents. There are also a number of a smaller private establishments receiving government grants. The Hadaiek El Kobba center has students in residence from Saturday morning to Thursday afternoon, and provides academic and trade training. Other residential centers are in Alexandria, Tanta, Menya.

Financial Assistance - Government schools and institutions are free of charge.

Recreation and Leisure Time Programs - Comprehensive recreational programs in residential facilities are planned by a specialist for daily activities and group games, as well as for summer camps. A Mataria Center team joined the Special Olympics international program in Baton Rouge, 1984.

Research - Studies have been made on the vocational potential of retarded adolescents in Cairo; another research and demonstration project concerned a comprehensive approach to rehabilitation through evaluation, counseling, vocational and pre-vocational training. Studies linking severe malnutrition and lack of an intellectually stimulating environment have been made; the Medical Research Institute of Alexandria University made a 10 year study on the incidence of Down Syndrome (0.84%) in newborns.

Personnel Training - Special education teachers receive a 2-year special training in supplementary divisions of teacher training schools, both general and rural. Child care workers in residential homes and social workers have specialized training in an institute of social service. An Institute to train people to work in the field of mental retardation has been initiated - supported by Caritas and the Right to Live Association in cooperation with the Department of Social Services: Rehabilitation Staff Training Centre, College de la Salle, 6 Sekett El Bashin St., El Daher, Cairo.

Planning and Coordination - The Society for Intellectual Development is responsible for the general planning of technical and administrative programs and periodic follow-up, together with the Planning Department of the Ministry of Social Affairs. The scientific board of the Society, headed by Dr. M. El-Banna, has 9 advisors covering all disciplines concerned with mental retardation, and deals with the determination of needs and requirements, prospective projects in rehabilitation and care, research and coordination, organization of conferences, seminars and training courses for Egypt and other Arab countries, and setting up new centers and units for vocational training.

OTHER INFORMATION FOR VISITORS

Requests for information can be sent to Dr. M. El-Banna at the Ministry of Social Affairs, or c/o the Mataria Society, or the Right to Live Association.

School Holidays - From Mid-June to Mid-September.

FINLAND

The fourth largest state in Europe, Finland extends deep into the Arctic Zone; two thirds of its area is forest. The population (4.9 million) is more than 92% Finnish-speaking with a small Swedish-speaking minority. More than half the population live in cities and towns. There is compulsory 9 year elementary education from age 7 to 16. Women have been entitled to vote since 1906. The national health and social security system is comprehensive (social insurance and benefits such as maternity and child allowances, pensions, accident and sickness insurance). Additional services are based on individual needs and are administered by both the social welfare boards of the communes (the basic unit of local government), and by the federation of communes.

Care of persons with mental retardation began before the end of the 19th century. The first comprehensive legislation was in 1958; the present law (1978) is called an Act on the Special Services for the Developmentally Handicapped. It applies to all who, mainly because of retarded intelligence, are in need of constant care, special education and supervision and who cannot get the services they need from the generic service systems. It is enforced by both the health and welfare branches of the Ministry of Social Affairs and Health, with local administration in the hands of the communal welfare boards. The country is divided into 15 mental retardation districts, each having a large number of facilities including central institution, day centers, sheltered work, housing units, family help, and other open care services. The federation of communes in each district has primary responsibility for the central institution and services provided under its auspices to persons in open care. Other services may be under the federation, a commune, or a private agency.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Sosiaali - ja terveysministeriö Snellmanninkatu 4-6 Helsinki 17	Ministry of Social Affairs and Health
Sosiaalihallitus Siltasaarenkatu 18 C Helsinki 53	National Board of Social Affairs
Kuntousosaoto	Department for Rehabilitation
Lääkintöhallitus Siltasaarenkatu 18 A 00530 Helsinki 53	National Board of Health
Mielisairaanhoito-osasto	Mental Health Department
Opetusministeriö Kirkkokatu 3 00170 Helsinki 17	Ministry of Education

Kouluhallitus Hakaniemenkatu 2 00530 Helsinki 53	National Board of Schools
Opentusosasto	Education Department
Erityisopetustoimisto	Special Education Office
Työvoimaministeriö Kalevankatu 13 Helsinki 10	Ministry of Labor
Työvoimaosasto Albertinkatu 34 Helsinki 18	Department of Labor
Tyonvalitysasioiden toimisto Siltasaarenkatu 3 Helsinki 53	Labor Exchange Office
Ammatinvalinnanoh jaustoimisto Messeniuksenkatu 1 Helsinki 25	Career Selection Guidance Office

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

Professional

Kehitysvammaliitto r.y. Viljatie 4 00700 Helsinki 70	National Welfare Association for the Mentally Deficient

The National Welfare Association for the Mentally Deficient was established in 1951 as a central cooperative body of private organizations providing residential care; the Association's sphere of concern has broadened to include the total field of mental retardation services, research and planning. It consists of over 40 affiliated organizations, participates actively in the Nordic Association for Mental Retardation, the International Association for the Scientific Study of Mental Deficiency and Rehabilitation International.

Citizen

Kehitysvammaisten Tukiliitto r.y. Aleksanterinkatu 31 A 12 33100 Tampere 10	National Association of Societies for Mentally Handicapped

The first societies of parents and friends of the mentally retarded were founded in 1957 and the National Association in 1961. There are now over 190 societies and a membership of nearly 15,000 including mentally handicapped people. The Association promotes programs of public information, provides consultation and training courses for parents and for mentally handicapped persons. The national association and its local societies also organize different kinds of recreation services for parents and mentally handicapped children, youth and adults. It cooperates closely with the National Welfare Association for the Mentally Deficient and is a member of the International League of Societies for Persons with Mental Handicap since 1966.

De Utvecklingsstördas Väl Töölönkatu 27 A 15 00260 Helsinki	National Association of Swedish-speaking societies for the Mentally Handicapped

This Association serves the Swedish-speaking population. It cooperates with the above organizations and also with the Swedish national parents society (FUB) and functions in a similar manner.

Other Organizations which Include some Concern for Mental Retardation

Erityiskansanopiston Kannatusyhdistys Lehtimäen opisto, 63500 Lehtimäki	Association for Special Adult Education
Suomen Erityiskasvatuksen Liitto	Association for Special Education in Finland
Nuorten Ystävät r.y. Rautatienkatu 1 Oulu 10	Friends of Youth
Suomen Kirkon Sisälähetysseura Töölönkatu 55 00250 Helsinki	Finnish Church Home Missions Society

RESEARCH

Tutkimusyksileko Kehitysvammaliitto r.y. Viljatie 4 00700 Helsinki 70	Mental Handicap Research Unit National Welfare Association for the Mentally Deficient
Rinnekoti - Säätion Tutkimuslaitos Rinnekoti 02980 Espoo	Rinnekoti Foundation for Mental Retardation Research
Sosiaali - ja terveysministeriö Snellmanninkatu 4-6 Helsinki 17	Ministry of Social Affairs and Health

Research is also carried out at the Universities of Jyväskylä, Joensuun and Helsinki.

PUBLICATIONS

Ketju Viljatie 4 00070 Helsinki 70	The Chain - Journal of the National Welfare Association for the Mentally Deficient

Läka och Lära Töölönkatu 27 A 15 00260 Helsinki 25	Heal and Teach - in Swedish Journal of De Utvecklingsstördas Väl
Tukiviesti Aleksanterinkatu 31 A 12 33100 Tampere 10	Support Message - Journal of the National Association of Societies for the Mentally Handicapped

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Statistics - The prevalence of mental retardation is estimated to be 0.5-0.7 percent, i.e., about 30,000 persons with different degrees of mental retardation. About 18,500 receive special services.

Education - Special classes are provided in the comprehensive schools, since the newest educational Act from the year 1985, for children unable to follow ordinary instruction. Mentally handicapped children have the right to education according to their needs. The local school authorities are responsible for organizing the educational services for all except the most severely handicapped. Educational services for them can be provided either by the educational or the social welfare authorities. The education for mentally handicapped children can start one year earlier and last one year longer than the education for non-handicapped children.

Work Training and Employment - Work training, instruction and sheltered work are provided at the institutions for the mentally retarded and at day centers.

Medical Care - In addition to medical services provided in the residential institutions, medical care is offered through the child guidance clinics and psychiatric care offices. General health services in Finland are well developed and health centers are available in most communities, with special emphasis on maternal and child health programs.

Residential Care - In 1985 there were 15 central institutions with little over 6,000 places. Many were built in the '60s and '70s, planned for 200-400 residents, who live in small detached units 4-8, in family style. Group homes have a total of about 700 places. There are still about 2,000 people in mental hospitals and homes for aged people.

Financial Assistance - Most moderately and severely retarded children are entitled to child allowances and a disability pension after age 16. Parents of low means can also get public assistance from the social welfare committees. The state and the communes share establishment and administrative costs of both institutional and day programs.

Recreation - The National Parent's Associations, their local associations and other private organizations arrange recreational camps for mentally retarded children and their parents. Local associations also have clubs, social evenings and excursions for parents and children, also for adults living in group homes.

Research - The Mental Handicap Research Unit of the National Welfare Association for the Mentally Deficient (Kehitysvammaliitto), mainly occupied with social and behavioral research, and The Rinnekoti Research Foundation, mainly occupied with medical research, are two main private research organizations. The chairs or departments of special education located in universities of Jyväskylä, Joensuun and starting in 1986 also Helsinki, are responsible for educational studies. Some university medical departments (neurology, clinical genetics) in Helsinki, Turku and Oulu are dealing regularly with mental handicap questions.

Personnel Training - Mental handicap nurses receive, starting 1987, a three years training; mental handicap instructors' training varies, depending upon the background education, from one year to three years training. The mental handicap teachers receive university training varying from one year (when the trainees have a lower level university training before) to two years. The main teacher training center is in Jyväskylä University.

Planning - Preventative planning is done in connection with research and the activities of the general health system, family guidance, maternity and children's clinics, etc. Legislative planning is done by the Ministry of Social Affairs and the various committees appointed by the Council of State and Parliament.

OTHER INFORMATION FOR VISITORS

The general department of the Ministry of Social Affairs and Health, or the Administrative office of the Board of Social Affairs can help visitors plan their program.

School Holidays - June through mid-August, Christmas and Easter.

FRANCE

France (population 55.6 million) has a comprehensive and complex system of social security measures, backed by an extensive network of social services which operates from the national level through regions and departments to the local community.

The National Government has responded well to the rapidly-growing associations sponsored by families with mentally retarded children, united since 1960 in UNAPEI.

A comprehensive national law to improve handicapped persons' lives and ensure social integration was adopted by the French Parliament in 1975. Prevention, care, education, vocational training and guidance, housing and transportation services are now coordinated by an inter-ministerial committee, assisted by a consultative council. A guaranteed minimum income is provided disabled people, either through wages for work or allowances and benefits provided by the government.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministère de l'Éducation Nationale Grenelle Paris 7e	Ministry of National Education
Ministère des Affaires Sociales et de le Solidarité Nationale 8, avenue de Ségur 75007 Paris	Ministry of Social Affairs and National Solidarity
Direction générale de la Santé	General Directorate of Health
Direction de l'Action Sociale	Directorate of Social Action
Sous-Direction de la Famille, de l'Enfance et de la Vie Sociale	Division of Family, Children and Social Life
Sous-Direction de la Réadaptation de la Vieillesse et de l'Aide Sociale	Division of Rehabilitation, Old Age and Social Assistance
Direction de la Sécurité Sociale	Directorate of Social Security
Sous-Direction de l'Assurance Maladie	Division of Health Insurance
Sous-Direction de l'Assurance Vieillesse	Division of Old Age Insurance
Sous-Direction de la Famille, des Accidents du travail du Handicap et de la Mutualité	Division of the Family, Occupational Accidents, Disability and Mutuality
Direction des Hôpitaux	Directorate of Hospitals
Service des Constructions et de l'équipement	Service of Facilities and Equipment
Direction de la Pharmacie et des Médicaments	Central Pharmaceutical and Medications Service

Ministère du Travail
127 rue de Grenelle
Paris 7e

Ministry of Labor

Direction des relations de travail
Delegation a l'emploi
Delegation a la formation professionelle

Directorate of Labor Relations
Delegation for Employment
Delegation for Vocational training

National Planning or Coordinating Body - Mental retardation is a major part of the concern of the Consultative Council and the Inter-ministerial Committee set up in the field of rehabilitation in 1975. In research, CTNERHI, the National Technical Center for Study and Research in the field of handicapping conditions provides coordination in the study of certain problems. Regional centers (CREAI - Centre regionale de l'Enfance et de l'Adolescence Inadaptés) are semi-public organizations that advise and inform public authorities and private agencies regarding the establishment of specialized facilities.

VOLUNTARY ORGANIZATIONS

Primary Concern in Mental Retardation

Professional

Groupement Français de Neuro-psychopathologie et d'Hygiene Mentale de l'Enfance
c/o Professeur P.L.R. Lafon
Faculté de Médecine de Montpellier
34 - Montpellier

French Group on Child Neuro-psycho-pathology and Mental Hygiene

Member of the International Association for the Scientific Study of Mental Deficiency. The First Congress of the IASSMD was held in Montpellier in 1967.

Regional

Comité de'Etudes, de Soins et d'Action Permanente en faveur des Déficients Mentaux
81, rue St. Lazare
75009 Paris

CESAP - Committee for Study, Care and Action on behalf of Severely Retarded in Paris Region

Citizen (Parents and Friends)

Union Nationale des Associations de Parents d'Enfants Inadaptés
15, rue Coysevox
75018 Paris

UNAPEI - National Association for the Mentally Handicapped

Founded in 1960 by the union of established parents' groups, UNAPEI has a membership of 65,000 families and an increasing number of affiliated members. The organization consists of 250 associations with 350 local sections. Each of the 22 Regions is represented by a delegate on the Administrative Council. With a headquarters staff of 36 persons and local responsibility for creation and management of 1,500 facilities, UNAPEI and its member associations have made a great impact on developments in the field of mental retardation, in legislation as well as in changing public attitudes. A founding member of the ILSMH, UNAPEI was host to the League's 1966 Congress, held in the Palais de UNESCO and will again host the Congress in 1990. The management of the 1,500 local facilities is coordinated by an employers union, the Syndicat National des Associations de Parents d'Enfants Inadaptés (SNAPEI), a specialized branch of UNAPEI. Since 1963, UNAPEI has had official recognition as an "établissement d'utilité publique."

Association de Volontaires Franco-Américains au Service des Inadaptés Mentaux (FAVA) 34 bis rue Vignon, Paris 83	Franco-American Volunteers' Association serving the Mentally Retarded

Initiated by Eunice Kennedy Shriver in 1968, FAVA has promoted recreation and sports for retarded young people, including annual Special Olympics.

Other Organizations which Include Mental Retardation

Association Française pour la Sauvegarde de l'Enfance et de l'Adolescence 28 place Saint Georges Paris 9e	AFSEA - French Association of Organizations for the Safeguard of Youth
Union Nationale Interfédérale des Oeuvres Privés Sanitaires et Sociales 103 rue de Faubourg Saint Honoré Paris 8e	UNIOPSS - National Interfederal Union of Private Health and Social Agencies
Association Nationale des Communautés Educatives 145 boulevard Magenta Paris 10e	ANCE - National Association of Children's Communities
Union Nationale des Assistants et Educateurs de l'Enfance 89, rue due Cherche-Midi 75006 Paris	UNAEDE - National Association of Child Care Workers and Assistants
Association Nationale des Assistantes de Service Social 3 rue de Stockholm Paris 8e	ANAS - National Association of Social Workers
Fédération des Sociétés de de Croix-Marine 59 rue de Châteaudun 63000 - Clermont-Ferrand	Federation of Blue Cross Societies

Service de Pédagogie Catéchetique Specialisée Centre National d'Enseignement Religieux 19 rue de Varenne Paris 7e	Service of Special Catechistic Pedagogy, National Religious Education Center
Groupe de Recherche et d'Action des Profesionnels de Foyers d'Adultes Handicapés 45 bis rue des Brieux 38120 St Egrève	GRAPFAH - Research and Action Group of Workers in Hostels for Handicapped Adults
Association Nationale des Educateurs de Jeunes Inadaptés 27 rue de Maubeuge 75009 Paris	ANEJI - National Association of Workers for Maladjusted Children
Association Nationale des Directeurs d'Etablissements et Services pour Handicapés 15 rue du Puits de l'Hermite 75005 Paris	ANAESI - National Association of Directors of Facilities and Services for the Handicapped
Association de Placement et d'Aide pour Jeunes Inadaptés 26 rue du Chemin Vert 75011 Paris	APAJH - Association for Placement and Aid to Maladjusted Children
Office Catholique des Handicapés 11, rue François Mouthon 75015 Paris	OCH - Catholic Office for Handicapped

RESEARCH

Centre Technique National d'Etudes et de Recherches sur les Handicaps et les Inadaptations 2 rue A. Comte 92173 Vanves	CTNERHI - National Technical Center on Handicapped Children and Youth (attached to the Ministry of Social Affairs)
Institut National de la Santé et Recherche Médicale Unité de Recherches médico-sociales "Les Pins" Montpellier	National Institute of Health and Medical Research Medico-social Research Unit "Les Pins"

PUBLICATIONS

Specialized Journals which Frequently Publish Articles on Mental Retardation

Revue de Neuro-Psychiatrie Infantile 15 rue Saint-Benoit, Paris 6eme	Journal on Neuropsychiatry of the Child

Cahiers de l'Enfance Inadaptée 5 rue Palatine, Paris 6e	Journal on the Maladapted Child
Union Sociale 103 rue du Faubourg St Honoré, Paris 8eme	Social Union
Réadaptation 10 rue de Sévres, Paris 7e	Rehabilitation
Revue Pratique de Psychologie de la Vie Sociale et d'Hygiène Mentale 59 rue de Châteaudun Clermont-Ferrand (Puy de Dome)	Journal on Psychological Practice in the Social and Mental Health Field
Recherches Service Catholique de l'Enfance et de la Jeunesse Inadaptées 19 rue de Varenne, 75007 Paris	Research
Ombres et Lumières Office Catholique des Handicapés 11 rue François Mouthon, 75014 Paris	Shadows and Light
Sauvegarde de l'Enfance 28 Place Saint-Georges, 75442 Paris	Child Protection
Épanouir, publication of UNAPEI 15 rue Coysevox, 75018 Paris	Growth/Development

Bibliography - "Bibliographie des ouvrages et articles de langue francaise sur arrièration mentale, dèbilitè, dèficiences intellectuelles et oligophrènies chez l'enfant," (Bibliography of publications in French on mental handicap, retardation, intellectual disabilities and oligophrenias in children.) edited by the CREAI of Paris, 20 rue Euler, Paris 83.

TERMINOLOGY

Terminology generally in use: Dèficients mentaux, arriérés mentaux, insuffisants mentaux, inadaptès.

Débiles légers simples - I.Q. 85 - 65/70
Débiles légers avec troubles associés - I.Q. 85 - 65/70
Débiles moyens - I.Q. 70-50
Débiles profonds - I.Q. 50-30
Arriérés profonds - Below 30 I.Q.

The I.Q. limits given above are listed only as a sample reference, many other elements being involved in classification and assessment.

The Ministry of National Education has responsibility during school age for "débiles légers and the more capable dèbiles moyens." All other services come within the domain of public health and social action programs, health authorities being particularly concerned with the "arriérés profonds."

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents - There are infant consultation centers available throughout the country. If a child shows abnormalities he is referred to a specialized medical center. Child mental hygiene centers will deal with the problem of mental retardation. In Paris CESAP (see above) provides consultation centers for severely retarded children in six hospitals. UNAPEI makes a special effort to contact and provide consultation to parents of young children through its Action Interfamilial.

Education - The law adopted in 1975 recognizes the right of handicapped children and adolescents to an education and the obligation of the government to assume the costs, whether the instruction is provided in regular or special classes run by the state or by private non-profit organizations. Children of borderline intelligence and the more capable of the mildly retarded generally attend "classes de perfectionnement" in the ordinary schools. Some may go to medical-pedagogical institutes, day or residential, but these are primarily for the more handicapped, both the "débiles moyens" of less ability and the "débiles profonds." "Instituts mèdico-pèdagogique" (IMP) are managed by voluntary organizations, private persons, or may be attached to a psychiatric hospital. The educational emphasis is on specialized psycho-motor and social training (rééducation).

Work Training and Employment - After age 14, vocational training "in classes professionels" is provided in ordinary schools and in the 30 "Ecoles Nationales de perfectionnement" (day or residential, or both). Adolescents who have attended the IMPs receive their training in an "Institut mèdico-professionnel" (IMPro) from 14 to 18 or 20 years of age. To provide long-term sheltered employment, the parents associations have provided" Centres d'Aide par le Travail" (CAT).

Medical Care - The medical needs of mentally retarded persons have been highlighted by the requirement that all the aforementioned facilities must have an attending physician in order to qualify for government subsidies. There has been increasing interest and participation by pediatricians in the mental retardation field, which formerly was seen primarily as the providence of psychiatry.

Residential Care - The largest share of specialized residential care for retarded persons is provided in the IMP and IMPro establishments. Some retarded children are to be found in psychiatric hospitals. There is a very critical shortage in residential care for the retarded adult. UNAPEI has led in providing small community residences ("foyers") for adults; there are now a number under other voluntary auspices, as for example, the programs under leadership of Jean Vanier, ("L'Arche"), started in Trosly Breuil, based on small groupings of adults and young adults in normalized surroundings, together with voluntary assistants.

Recreation - Scouting, social clubs, holiday residential and day camping programs have been developed extensively; the Special Olympics have been received with much enthusiasm in France.

Research - There has been growing interest in mental retardation research, both in the biological and the behavioral sciences. The international acclaim of

Lejeune's discovery of the chromosomal abnormality in Down's syndrome has underlined the importance of mental retardation as a field of research. Particularly notable has been the comprehensive research approach at the University of Montpellier.

Personnel Training - France has developed one of the most extensive programs of diversified training of personnel working with handicapped persons in general, and the mentally retarded in particular. Besides the "instituteurs spécialisés" (special teachers) and "jardinières d'enfants spécialisées" (special kindergarten teachers), the "éducateurs spécialisés (child care worker or counsellor) and moniteurs-éducateurs (special aides) are of particular significance since they assure a basic quality of care in residential and day facilities. (The difference between the last named is that the "éducateaur spécialisé" has higher entrance requirements plus a 3-year rather than a 2-year training period.)

Services for Retarded Persons Without Parents - UNAPEI has developed two programs to assist mentally retarded persons after their parent's deaths: a special life insurance policy taken out by the parents assures predetermined monthly payments for the surviving son or daughter; "associations tutèlaires," now some 95 throughout the country, provide protective and guardianship services for retarded individuals without parents, depending on individual need and administrative determination.

Planning - A major characteristic of post-war public affairs in France has been the succession of national 5-year plans affecting every aspect of economic and social life, especially the 4th plan with the development of the local authorities and specialized facilities. Through the growing influence and effectiveness of UNAPEI and of AFSEA, these plans have increasingly reflected the needs of the mentally retarded. But a great stride has been noted through the two laws in 1975 on human rights and facilities. 10 years later, we can see that their implementation has led to more satisfactory protection of disabled persons. On the other hand, the problem of integration remains an important issue, especially in the area of the employment, and for persons having multiple or rare handicaps.

OTHER INFORMATION FOR VISITORS

Requests for information may be directed to The Ministry of Social Affairs; UNAPEI will also give assistance and information.

School Holidays - In general, facilities are closed during July and August and 1 to 2 weeks over Easter and Christmas.

FEDERAL REPUBLIC OF GERMANY

The Federal Republic of Germany has a population of 61 million; it consists of eleven states (Länder) including West Berlin. Education is the responsibility of the individual Länder, the majority requiring 9 years of schooling beginning at age six. Along with education, the administration of health and welfare services are largely within the jurisdiction of the Länder, and striking differences exist from Land to Land. However, three basic Federal statutes provide a social security framework, the laws on social insurance, on pensions and on social assistance. Although these laws are fairly recent enactments, nationwide social insurance legislation dates back to the 1880s.

GOVERNMENT AGENCIES WITH MENTAL HANDICAP RESPONSIBILITIES

Federal

Bundesministerium für Arbeit and Sozialordnung	Ministry of Labor and Social Affairs
Bundesministerium für Jugend, Familie und Gesundheit 5300 Bonn	Ministry of Family, Youth and Health
Bundesministerium des Innern 5300 Bonn	Ministry of the Interior

Land

The government structure, including names and functions or ministries, differs from Land to Land. For information, write to the appropriate Federal Ministry, or to the Bundesvereinigung Lebenshilfe für geistig Behinderte (see below). There is no education authority on the federal level; in the Länder the Kultusministerien are the responsible agencies.

VOLUNTARY ORGANIZATIONS

Citizen and Professional

Bundesvereinigung Lebenshilfe für geistig Behinderte ("Lebenshilfe") Raiffeisentrasse 18, Postfach 80 D-3550 Marburg-Cappel,	National Association for the Mentally Handicapped ("Help for Living")

Founded in 1958, Lebenshilfe now has 100,000 members (parents, persons with mental handicap, professional workers, local and state officials and interested citizens) in its 400 associations, organized on local, district and state levels.

Lebenshilfe was a founding member of the International League of Societies for Persons with Mental Handicap and the International Association for the Scientific Study of Mental Deficiency. Over the years Lebenshilfe has become a most effective spokesman for persons with mental handicap. Working closely with government on both Land and Federal levels it has helped to bring about important legislation, as well as social and financial benefits to individuals. Local associations of Lebenshilfe are running hundreds of facilities for persons with mental handicap of all ages, employing some 15,000 professional workers. Through the efforts of its first Secretary General, Tom Mutters, it is involved in extensive assistance projects in developing countries, especially in Southeast Asia.

Other National Organizations Providing Residential and other Services

Verband evangelischer Einrichtungen für geistig und seelisch Behinderte Stafflenbergstr. 76, 7000 Stuttgart 1	Union of Evangelical Facilities for Mentally and Emotionally Disabled Persons
Verband Katholischer Einrichtungen für Lern-und Geistigbehinderte Karlstrasse 40, 7800 Freiburg	Union of Catholic Facilities for Learning Disabled and Mentally Handicapped Persons
Verband Anthroposophischer Einrichtungen für Heilpädagogik und Sozial-Therapie Obersondern 1, 5600 Wuppertal 23	Union of Anthroposophic Facilities for Curative and Social Therapy

Other National Organizations

Bundesarbeitsgemeinschaft der Freien Wohlfahrtspflege Franz-Lohe-Str. 19 5300 Bonn	Federal Committee on Voluntary Welfare
Bundesarbeitsgemeinschaft "Hilfe für Behinderte" Kirchfeldstr. 149 4000 Düsseldorf	Federal Committee of (40) National Organizations for Handicapped Persons
Stiftung "Hilfswerk für behinderte Kinder" Lessingstr. 4 5300 Bonn-Bad Godesberg	National Foundation for Handicapped Children
Bundesarbeitsgemeinschaft der Werkstätten für Behinderte e.V. Sonnemannstr. 5 6000 Frankfurt/M. 1	Federal Committee on Sheltered Workshops
Bundesarbeitsgemeinshaft Gemeinsam Leben-gemeinsam Lernen: Eltern gegen Aussonderung behinderte Kinder Stülerstr. 2 1000 Berlin 30	National Committee for School Integration (a recently established fast growing Parent movement)

Vereinigte Integrations Förderung c/o Klaus Fusseck Klenzerstr. 57 8000 München	United Integration Promotion (of adults living in the community)
Deutsche Behindertenhilfe Aktion Sorgenkind Franz-Lohe-Str. 19 5300 Bonn	(see Financial Assistance)

PUBLICATIONS

Lebenshilfe-Zeitung - journal for families and friends of persons with mental handicap, published 6 times a year.

Geistige Behinderung - the professional journal of Lebenshilfe, a quarterly, gives information for all disciplines dealing with mental handicap in theory and practice.

Other Lebenshilfe publications include: handbooks in the fields of early stimulation, nurseries, schools, workshops, living facilities, leisure time and sports; two series providing information and results of study congresses, workshops, etc.; information services: technical, legal and press service; a large number of information brochures and leaflets.

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents - Specialized medical examinations, counselling and treatment as well as education (early stimulation) is done mainly by pediatricians, child and youth psychiatric clinics and the local health centers, in the increasing number of diagnostic centers for handicapped children, and in about 450 interdisciplinary "Early-Help-Centers." Public health services are under the control of the "Länder" as is early diagnosis. Local public health authorities are legally under obligation to procure counselling services for parents of handicapped children, in most cases referring them to diagnostic and counselling services of other public or private bodies. The system of statutory routine examinations in the first, second and fourth year provides a way to plan early stimulation measures and programs, in which the mother of the handicapped child and the family fulfill important tasks. Early stimulation is given not only to mentally handicapped but to all handicapped children and to those who are at risk of handicap.

The 400 local Lebenshilfe societies carry much responsibility for parent counselling. In the Central Office at Marburg 70 professional workers deal with all aspects of mental handicap.

Education - Special education for mentally handicapped children existed in various cities already at the turn of the century; some of the schools served not only mildly but also moderately and severely handicapped children. Whatever programs existed were brought to a halt when Hitler came to power. After World War II these programs were resumed only slowly, with great differences between the "Länder" and at first only for the mildly handicapped.

For the moderately and severely handicapped, day centers with educational programs were developed by the Lebenshilfe and other voluntary agencies, and in some cases, by local authorities.

Now the Education Acts of the 11 Länder also provide for compulsory school education of mentally handicapped children (I.Q. below 60) from 6 to 18 years of age, which can be extended for some years (in one state up to the age of 25). Costs of material and personnel for these schools are covered by the government. Local communities are responsible for schools but in all Länder associations such as the local Lebenshilfe societies may also run schools. If private agencies assume the responsibility, the costs are mostly covered by the state.

All cities and rural areas have kindergarten programs for mentally handicapped children. There are approximately 450 special kindergartens providing for about 6,000 children. At present, more and more parents of mentally handicapped children of kindergarten age want forms of integrated education for their children (i.e. handicapped children go to regular kindergartens and non-handicapped children go to special kindergartens - so-called integrated kindergartens). The movement is spreading to requests for elementary school integrated classes and includes parents of children with various disabilities.

Work Training and Employment - are provided in sheltered workshops. In general, these are maintained by the Lebenshilfe associations, but some are under other voluntary organizations as well as local authorities. The number of such facilities has increased dramatically since 1962, from 17 to 400, providing training and work for about 75,000 handicapped persons (60,000 with mental handicap).

Medical Care - Periodic health examinations are provided by the public health departments, but routine medical care is left with the family physician or pediatrician. All pre-, peri- and post-natal measures for diagnosis of handicaps come under the terms of the statutory pregnancy medical care and of the statutory routine examination of infants. Genetic counselling centers at universities are increasingly used by the population. The examinations are voluntary and not legally binding, with the exception of the routine mass-examination for early diagnosis of PKU. Free prophylactic examinations of infants in all Länder consist of 8 examinations during the first four years of life. Family physicians and pediatricians regularly work together with the early help centers.

Residential Care - At present there are about 450 community-based hostels for some 10,000 adults working in sheltered workshops. In the near future another 10,000 places are needed. Although there are a great number of homes and institutions in the residential field, there is still a great shortage of hostels in the communities. The majority of residents in hostels work in workshops for the handicapped.

Financial Assistance - has been established as a right since 1962 with the implementation of the Federal Social Assistance Act (BSHG); it includes payment for rehabilitation services, medical treatment, home nursing and vocational training, it covers all age groups, and assures each mentally handicapped person the right of integration. The right to claim this "integration assistance" or other help, and the amounts granted, often are dependent on the basic income of the family. Important integration measures, such as attendance at special kindergartens, special schools and training in workshops for the handicapped, are free, apart from sharing the costs of food, etc. In addition to these statutory subsidies, Aktion Sorgenkind (a combined effort by television, voluntary welfare organizations and associations for handicapped people) collects a monthly 10 million DM by a TV quiz program, to support the building of needed facilities for disabled children and young adults.

Adult Training - In its national training center "Hermann-Stutte-Haus" attached to the Central Office, Lebenshilfe provides seminars for adult persons with mental handicap, aiming at stimulating and enabling their self-advocacy.

Recreation - Leisure time and recreation activities for mentally handicapped children, adolescents and adults and their parents are organized by the local and district societies of the Lebenshilfe and other similar organizations (individual and group activities and mother-child vacations).

Still unsolved are the problems of aging and aged mentally handicapped persons. A book and report of a first symposium dealing with these questions, (organized for the ILSMH in 1981) has been published in one of the Lebenshilfe series.

Research - Medical research is undertaken at various university hospitals; of particular significance was the PKU work of Bickel at Marburg and Heidelberg. In psychological studies Bondy and his associates pioneered at the University of Hamburg, particularly in the development of new testing instruments. The steady extension of school programs for the mentally handicapped has led to creation of a curriculum by the federal conference of the Ministries of Education.

Personnel Training - Training of staff for all facilities and services is provided by a variety of training institutions. Teachers and special therapists who want to be employed in schools for the mentally handicapped (I.Q. below 60) formerly had to study 2 additional years at university or institutes of special education at teacher training colleges. This has now been replaced by independent 8-term courses. Other teachers who have completed special education courses can be employed as school assistants or special educators after having completed specialized in-service training and 1 additional year of professional training. Furthermore there are courses for assistant staff to teachers, school assistants or special educators, especially for nursing and technical functions.

In addition to these training facilities, Lebenshilfe and some other volunteer associations offer a large number of 6 to 8 week courses in special subjects or techniques related to educational and technical tasks in facilities for mentally handicapped persons. Included are courses for parents and volunteers, special courses for staff members in hostels, as well as for leisure time activities and for early stimulation.

Planning and Coordination - From its early years, the national association Lebenshilfe has been a most significant source for nationwide planning and coordination. With the rapid growth of education, health and welfare services for the mentally handicapped there is increasing effort to coordinate legislation and programming for the mentally handicapped with that for other types of disability, particularly through the Bundesarbeitsgemeinschaft Hilfe für Behinderte (Federal Committee on Assistance to the Handicapped) and other organizations.

The German rehabilitation system includes coordinating bodies on different levels - ministries, public authorities, agencies which are financially responsible for rehabilitation, private welfare organizations, organizations for the handicapped, parents' organizations, professional organizations, the handicapped themselves, foundations, day care and residential facilities and, on state level, planning committees to work together to improve help for the mentally handicapped.

OTHER INFORMATION FOR VISITORS

Information can be requested from the Federal Ministries or from Lebenshilfe, which has available information leaflets, will give advice on specific programs and facilitate arrangements for visitors.

School Holidays - The summer school vacation period is generally [illegible] weeks in length, varying in the different "Länder" (states) during the months of June - September.

GHANA

The Republic of Ghana has an estimated populated of 13.9 million in 1987. An independent state on the West Coast of Africa since 1957, Ghana had a stormy history since its first decade, culminating in alternating periods of military and of civilian governments. Since 1982 the Head of State has been Ft.Lt.J.J. Rawlings, Chairman of the Provincial National Defence Council. (P.N.D.C.)

The people of Ghana represent many ethnic groups and more than fifty different languages and dialects are spoken, but during the many years of British colonial rule both the English language and English Education system became widespread.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Health
P.O. Box M. 84
Ministry Branch Post Office
ACCRA.

Ministry of Labour and Social Welfare
P.O. Box M. 45
Ministry Branch Post Office
ACCRA.

Department of Social Welfare
P.O. Box M. 230
Ministry Branch Post Office
ACCRA.

The activities of the Society of Friends of Mentally Retarded Children, and in particular its first major project of national significance, the construction of a residential home for mentally retarded children, have been very materially aided by public support during its early years from the late Mr. J.W.K. Harlley, who was then Deputy Chairman of the National Liberation Council, and later by the late General Acheapong, and the Asantehene Otumfuo Opoku Ware II, who is the Patron-in-chief.

VOLUNTARY ORGANIZATION

Society of Friends of Mentally Retarded Children. P.O. Box 640, ACCRA.

Founded in March 1968 and since 1970 a member of the International League of Societies for Persons with Mental Handicap, the Society has been the driving force in gaining services for mentally retarded children in Ghana. It operates through its 5 branches in Accra, Kumasi, Koforidua, Cape Coast, and Sekondi/Takoradi, established in 1975, 1982 and 1983, in the five regional capitals of the country.

BRIEF DESCRIPTIVE NOTES OF PROGRAMME AREAS

Case finding, diagnosis and assessment, consultation to parents - The Society maintains in several places counselling services for which several psychiatric specialists, physicians, clinical psychologists and social workers have volunteered their services.

Education - In 1969, the Society opened a day nursery at the Accra Community Centre, the first education programme for retarded children in the country. The nursery (which later grew into a school) was moved into the Home when that was completed in 1970. Since 1974, the Ministry of Education has taken over the running of the Home and School in Accra under the direction of a Board of Governers in which the Society has a strong representation.

In 1976 the Society of Friends opened a school for mentally retarded children in Kumasi. Subsequently three more schools for retarded children were opened: the one at Sekondi/Takoradi has since 1982 been taken over by the Ghana Education Service and similar arrangements are in progress for the school at Kumasi. The Society continues to run the schools at Cape Coast and Koforidua.

Residential Care - Before 1970 the Psychiatric Hospital in Accra, built to accommodate 600 patients but actually housing over 2000, had among its population many retarded individuals and in particular young retarded children. The very unfavorable conditions under which the children lived caused the Society of Friends of Mentally Retarded Children to make a small Home to house these children its first major project. The Home, planned to accommodate eventually 100 children was erected with funds solicited by the Society and supplemented by substantial grants from the Government, as well as "Brot für die Welt" (of the Federal Republic of Germany). Early in 1986 a unit school for the mentally retarded children was established at the Accra Psychiatric Hospital.

Recreation (leisure time programme) - the Society undertakes to provide some recreational activities both for the retarded children living in the Mental Hospital and those living in the Home and School in Accra. At present most who are labeled severely retarded are still housed in the Mental Hospital in Accra, while children considered educable are accommodated in the Home. The Society also tries to have 3 or more of its members visit the children in each of these institutions at least every Saturday. Additionally members of the Society are encouraged to take some of the children from the school to their homes during week-ends.

Personal Training - In September 1986 a specialist Training College for Teacher of mentally retarded children was opened at Mampong-Akwapin in the Eastern Region of the Country.

OTHER INFORMATION FOR VISITORS

Requests for information and assistance in planning can be addressed to any of the Ministries listed, or to the Society.

School Holidays - Vacation time in Ghana is from mid - July or August to mid - September, mid-December to mid-January and mid-April to mid-May.

GREECE

The Hellenic Republic was established in 1974; it is headed by the Premier who is responsible to a 300 member Parliament. Local government consists of 52 provinces; health and educational services are regionalized. Estimated population (1987) 10 million; Athens, the capital, has over 3 million people.

In recent years Greece has been going through a system-wide change in its delivery of human services. In the field of developmental disabilities there remains a wide variety of and flexibility in service programs and providers, with coordination and support on regional and central levels.

Measures to meet the problems of mentally retarded persons focus upon instruction and training in appropriate programs for their development, wherever possible in their own communities. In cases of severe mental retardation or where remaining at home is not possible, family-like surroundings or other special institutional care is provided, with therapeutic treatment aimed at rehabilitation and return to the community. Regional disability services (outpatient) are available for persons in need of a variety of therapies, as physical, occupational, counselling, speech, as well as for other needs such as guardianship, artificial or prosthetic supports, and other rehabilitation and vocational assistance.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Public Health, Welfare and Social Security Department of Mental Health Department of Handicapped Persons 17 Aristotle Street Athens	(Formerly Ministry of Community Services) Oversees all organizations and establishments for disabled persons; provides economic assistance to disabled individuals.
Ministry of National Education and Religion 15 Metropoleos Street Athens	Oversees and designs special education and vocational instruction of children with special needs.
Ministry of Labour 40 Perios Street Athens	Supervises and develops services for vocational rehabilitation of disabled persons.

ADDITIONAL ORGANIZATIONS SERVING MENTALLY RETARDED AND/OR PHYSICALLY DISABLED PERSONS

P.I.K.P.A. - Patriotic Institution for Social Welfare and Assistance
5 Tsoxa, Ampelokipoi, Athens

A National Foundation in existence since 1914. It oversees and coordinates activities supported by the Ministry of Health including comprehensive maternal and child care, hospitals for blind persons, residential and day facilities for children with cerebral palsy, mental retardation and other disabilities; environmental health aid, nutritional services, and education of specialized professional workers.

National Institute for Rehabilitation of Disabled (N.I.R.D.)
8 Hasias Avenue, St. Anagyros, Attica

Serves physically disabled persons above the age of 15, providing comprehensive care for their physical, social, educational and vocational needs, usually in 2 or 3 year courses, in different locations. Other residential centers affiliated with N.I.R.D. serve younger children with convulsive disabilities and cerebral palsy, or other birth defects.

Greek Society for the Protection and Rehabilitation of Disabled Children
16 Kononos, Pangrati, Athens

Maintains three centers for physically disabled children (3-15 years) which provide education from kindergarten through high school. There are 520 children in the Pangrati center, 75 and 40 in the centers in Thessaloniki and Chania, Crete.

VOLUNTARY ORGANIZATIONS WITH PRIMARY CONCERN IN MENTAL RETARDATION

As stated above, there is close interaction between official and voluntary agencies; societies of parents, for example, are frequently involved in managing special services, others have been initiated by individual professional workers or are church related; all have some supervision by a state agency. Three such organizations hold membership in the International League of Societies for Persons with Mental Handicap:

Psychological Center for Northern Greece
9 Aghiou Seraphim Street
546 43 Thessaloniki (joined in 1982)

A large residential (225) and day (100) school started over 25 years ago by Dr. Tutula Nanakos, psychologist. A branch has been opened in Xanthis for 15 residential and 10 day pupils. Both offer consultation services to parents and teachers.

Society of Parents and Guardians of Mentally Handicapped Children "ELPIDA"
P.O. Box 10655, Thessaloniki (joined in 1982)

Provides education and training for 30 severely handicapped children, 6 to 18 years of age.

"Stoupathion" Service for Special Education
c/o Center for Mental Health
135 Leoforos Pentelis, Halandri, Athens (joined in 1984)

A combined professional-parent enterprise which started in 1960, to serve children with birth defects and intellectual disabilities, now providing residential and sheltered work opportunities for 30 persons above age 18, as well as other services. (Panhellenic Union of Parents and Guardians of Maladapted Children i.e. children with birth defects.)

Some others are "Theotokis" Day School in St. Anargyious with 290 mildly retarded children living at home and 30 in residence. "S.O.S." is a day center for 30 children with autism or other developmental delay run by the Society of Parents, Guardians and Friends of Autistic Children New Phaleron. The Union for Child Protection provides care for 110 residential and 45 day pupils from 3 to 15 years with severe and profound intellectual disabilities, in Holagro.

BRIEF DESCRIPTIVE ROLES ON PROGRAMS AREAS

Early Intervention, Casefinding, Consultation to Parents - The well-baby clinics of P.I.K.P.A. identify problems and advise parents, who may then be referred to a Children's Medical Center in their region for diagnosis and specialist instruction about treatment and care, as well as eventual referral if required, to a day or residential center. There are presently functioning three Centers for Mental Health, 68 Notara St., Athens, 160 Kolokotronis Street, Piraeus and 40 Mela Street, Thessaloniki, which also provide diagnosis and consultation.

Other referral centers could include the pediatric neuropsychiatric hospital "Daou Pentelis" in Goudi, P.I.K.P.A.'s consultation and treatment center for young children in Piraeus "Michalinou;" the Theotokos school in St. Anagyros; the Psychological Center in Northern Greece or one of the Children's Hospitals.

Education - The law on "Protection for All the Handicapped" guarantees education and treatment from the time the disability is first manifested. This includes special classes in regular schools if the handicap is not too severe. As in many countries, the move to community rather than segregated educational services is taking place only slowly for the more disabled children.

Residential Care - A few residential institutions are large (200 - 300) but more frequently are for 30 - 80 persons, or smaller. According to the listing provided by the Director of Mental Health there are 11 in the Attica region (Athens), and 10 in other parts of the country, for the instruction and training of mentally retarded children and young people to age 18 or 19. This does not include adults who may be in psychiatric hospitals. Residences for children are funded principally by state funds but are managed and controlled by other agencies, frequently societies of parents and guardians.

Work Training and Employment - Schools emphasize training in social and vocational skills. Since Greece became a member of the European Community, it is making use of services offered through Mrs. Tsitseli, Director of Handicapped Training Programs for E.E.C. (17 Aristotle Street, Athens) to develop more vocational training programs and employment opportunities.

OTHER INFORMATION FOR VISITORS

Inquiries regarding programs for persons with mental retardation or other developmental disabilities may be addressed to:

Mr. Nikos Vryonis
Director of Mental Health
Ministry of Public Health
17 Aristotle Street, Athens 10187.

School Holidays - Christmas and Easter (Greek Orthodox); mid-June to Mid-September.

GUATEMALA

The center of the Mayan Indian empire a thousand years before Spanish colonization, Guatemala is the northernmost and most populous of the Central American states. Its population (1987 estimate 8.4 million) is growing at a rate of 3.1% yearly; about half are of pure blooded Mayan Indian descent, the rest largely mixed Spanish and Indian. In 1983, the literacy rate was estimated at 51%. Spanish is the official language but Indian languages are spoken in many rural areas where about 65% of the people live.

Primary education is compulsory and free from 7 to 14 years, but in rural districts and areas of traditional native culture many children have only 3 years or less; an active program of school building is promoted. About 2% of the population has completed one or more years of university work, mainly at the University of San Carlos, one of the oldest universities in the Americas, (founded 1679). Four new universities have opened since 1950.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministerio de Salud Pública Departamento de Salud Mental Palacio Nacional, Zona 1	Ministry of Public Health Mental Health Department
Ministerio de Educación Pública Sección de Educación Especial Palacio Nacional, Zona 1	Ministry of Public Education Special Education Department
Ministerio de Trabajo y Asistencia Social Instituto Guatemalteco de Seguridad Social	Ministry of Labor and Social Welfare Guatemalan Social Security Institute

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation
Citizen and Professional

Instituto Neurológico de Guatemala
Area del Hospital Roosevelt
Apartado Postal 1986
Zona 11, Guatemala City

Centro Psico-Pedagógico
Chalet "Villace"
2 a. Calle 34-15, Zona 7

The Instituto Neurológico was founded in 1961 as a private, non profit organization, sponsored by parents, other citizens and professional groups. Its Association of Parents is affiliated with the International League of Societies for Persons with Mental Handicap (ILSMH).

Other Voluntary Organizations which Include Mental Retardation

Consejo de Bienestar Social 1 a "C" 4-43, Zona 1	Social Welfare Council

Comitè Nacional Pro Ciegos y Sordo-Mudos 9 a Calle 3-07, Zona 1	National Committee for the Blind and Deaf
Liga de Hygiene Mental 4 a "C", 0-27, Zona 1	League for Mental Health

RESEARCH

Departamentos de Neurología Pediatrica y de Fisiatría Roosevelt Hospital Carretera Roosevelt, Zona 11	Departments of Pediatric Neurology and of Physical Medicine
Instituto Neurológico de Guatemala (see above)	Neurological Institute of Guatemala
INCAP - Instituto de Nutrición de Centroamerica y Panamà Unidad de Crecimiento y Desarrollo Carretera Roosevelt, Zona 11	Institute of Nutrition of Central America and Panamà Growth and Development Unit

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents - The Instituto Neurológico provides diagnostic and consultation services for children accepted in its center and for others, and also provides some consultation and evaluation services to other centers through the professionals affiliated as volunteers with the Instituto. The Department of Pediatric Neurology of Roosevelt Hospital provides diagnosis and counseling; some mentally retarded persons are seen at the Mental Health Clinic and the Child Guidance Clinic. At the government day school, parents are required to attend training sessions to learn to help their children.

Education - There are no special classes for handicapped children in the elementary schools because of the shortage of facilities and trained teachers. The Instituto Neurológico's day school, the Centro Psico-pedagógico, started in 1961, serves children from age 3 who are severely to mildly retarded and a few adults. Another private day school for mildly retarded children exists and a few retarded children are at the school for the deaf, and at the residential facilities noted below. In 1975, the government opened its first day school for retarded children, the Centro de Rehabilitación de Niños Subnormales, which serves 5 to 13 year olds.

Work Training and Employment - The Instituto Neurológico provides sheltered work training including some agricultural training. Retarded persons are generally not accepted in the outstanding rehabilitation centers which serve the physically handicapped. Recently a vocational training program was opened to give them opportunity to work in different areas.

Medical Care - is provided by private physicians who refer the more obviously retarded to Roosevelt or other hospitals, or to the Instituto Neurológico which can offer, to a limited number, complete medical care in all specialties except surgical intervention.
Residential Care - A limited number of retarded children and adults are cared for in the century-old Recuperación Centro No. 1, an institution for chronically disabled, and in the Neuropsychiatric Hospital, while some mildly retarded are in the large institution for dependent children, Centro Educativo Asistencial.

Financial Assistance - Fees in the private schools are based on the family's ability to pay; a few children receive scholarships. The Instituto Neurológico is supported by private donations, fees and public fund raising, and receives a small amount of the national lottery receipts.

Recreation - Excursions are a part of the day school programs providing social learning experiences as well as recreation.

Research - The Instituto Neurológico has done some educational research and, together with the Department of Pediatric Neurology at Roosevelt Hospital, research in the treatment of convulsive disorders, use of new drugs and congenital toxoplasmosis. The research in the influence of nutrition on mental and physical development carried on by INCAP, with support from WHO, is internationally known.

Personnel Training - Teachers have 5 years of training after 6 years of elementary school; some short term specialization courses and in-service training have been provided. Visiting consultants have been available and a Partners of the Americas exchange exists with the state of Alabama, centered in the government day school.

Information and assistance in arranging visits can be given by the Instituto Neurológico de Guatemala, or the Special Education Department in the Ministry of Education. At least one week's notice is requested.

School Holidays:

3 weeks at Christmas and Easter week.

HONDURAS

Honduras is one of the largest countries in Central America and has a population of almost 5 million. It is estimated that approximately 10% are persons with disabilities, but there is no census specifying the number of persons with mental retardation. As of November, 1987, there existed some legislation granting minimal protection to all persons with disabilities. Most of the responses to the problem of mental retardation have been private in nature. The programs which exist at the moment cover a minimum percentage of the population in need. In Tegucigalpa, the capital, and in other sections of the country, there are early stimulation programs, but they are very isolated. At other levels, there exist five special schools with some length of experience. The model of integration is very new as is the field of vocational rehabilitation which at this point is limited to one pre-vocational workshop and some cases of community training.

GOVERNMENT AGENCIES

Ministerio de Educación Departamento de Educación Especial 1a Calle, 2a y 4a Avenida Comayaguela, D.C.	Ministry of Public Education Department of Special Education
Centro de Investigación y Educación Especial	Center of Research and Special Education
Talleres Especiales de Capacitación	Special Vocational Training Workshops
Ministerio de Salud Comayaguela, D.C.	Ministry of Health
Ministerio de Trabajo y Prevision Social Comayaguela, D.C.	Ministry of Labor and Social Security

Consejo Nacional de Rehabilitación Integral
A coordinative body, under the Ministry of Labor, concerned with all disabilities.

PRIVATE ORGANIZATIONS

Coalition and Planning

Fundación Hondureña de Rehabilitación del Limitado (FUHRIL) Colonia Alameda Apartado Postal 852, Tegucigalpa	Honduran Foundation for Rehabilitation of the Disabled

FUHRIL is a recently formed coalition of 12 Honduran rehabilitation organizations. Through its staff of psychologists, social workers, and an occupational and recreational therapist, it provides resources and technical assistance to these organizations and various programs throughout the country. It also provides some direct services to individuals and has mounted a public education program.

Early Stimulation

Centro de Estimulación para el Niño
Barrio Pueblo Nuevo, Tegucigalpa

The Child Stimulation Center

The Center provides early stimulation services for children ages 3-6. It is currently in the process of constructing a new facility to serve a greater number of children.

Special Education Programs

Instituto Psycopedagógico
Juana LeCler
Colonia Los Robles
Apartado Postal 1232, Comayaguela

Juana LeCler Psycho-Pedagogical

This Institute provides special education and some minimal therapeutic services to children with mental retardation and other special needs, and to their families, who are united in an Association of Parents and Friends. It also provides some pre-vocational training in sheltered workshops.

Instituto PREPASE
Tegucigalpa

PREPASE Institute

The PREPASE Institute provides educational services for children with cerebral palsy.

Centro de Educación Especial Luz y Amor
Olanchito, Yoro

Light and Love Center of Special Education

This Center provides special education services for approximately 30 children from ages 7 and up with mental retardation and various other learning and sensory impairments. Some early stimulation services have been offered in association with the school.

Instituto Sampedraño de Educación Especial
Apartado Postal 469, San Pedro Sula

San Pedro Institute of Special Education

The Institute provides special education and minimal therapeutic services to children with various disabilities, including mental retardation.

Escuela Emilia Dacuir
Barrio La Isla, La Ceiba

Emilia Dacuir School

This school provides special education services for children with special needs, including mental retardation.

Residential Service

Aldea S.O.S.
Colonia Miraflores
Apartado Postal 1054
Tegucigalpa

Aldea S.O.S. provides residential and educational services for approximately 150 children who have been abandoned by their parents and/or have special needs.

Professional Training

Escuela Superior de Profesorado	Teacher Training College

Colonia Miraflores
Tegucigalpa

Provides teacher training primarily for educators who wish to work in regular schools. However, it also provides a training program for individuals who want to enter the field of special education.

HONG KONG

Hong Kong is a British Colony (to become part of the People's Republic of China by the end of the century). Of a population of 5.6 million in 1985, 98% are Chinese. Rehabilitation services in Hong Kong have a long history, but the most significant developments occurred since World War II. During the past ten years, government and the voluntary sector have been working closely together on an integrated and coordinated approach to rehabilitation.

In Hong Kong, as in many other areas, comprehensive statistics on the population are not available. The following estimate of the number of mentally handicapped in Hong Kong in 1984 is worked out on the basis of prevalence rates derived from local as well as overseas experience: severe grades - 5,824, moderate grades - 22,440, mild grades - 84,000: total 112,264.

In order to facilitate long term planning in the provision of services, a computerized Central Registry of the Disabled (CROD) began operation in October, 1983.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Social Welfare Department

Chief Social Work Office (Development)
World Trade Centre 19/F
280 Gloucester Road, Hong Kong

Education Department

Principal Education Officer (Special Education)
Lee Gardens, 2/F, Hysan Avenue
Causeway Bay, Hong Kong

Medical & Health Department

Principal Medical & Health Officer
Sunning Plaza, 10/F
Hysan Avenue, Causeway Bay, Hong Kong

Labour Department

Senior Labour Officer (Selective Placement)
77 Ngau Tau Kok Road, Amoy Plaza
G/F, Kowloon

Technical Education and Industrial Training Department

14/F Harbour Centre
24 Harbour Road
Wanchai, Hong Kong

Coordination and Planning

Rehabilitation Division
Education and Manpower Branch
Government Secretariat

Commissioner for Rehabilitation
14/F Harbour Building
38 Pier Road, Central Hong Kong

In the voluntary field this responsibility is carried by the:

Joint Council for the Physically & Mentally Disabled
(Rehabilitation Division, H.K. Council of Social Service)
Duke of Windsor Social Service Building
15 Hennessy Road 13/F, Hong Kong

Postal Address: G.P.O. Box 474, Hong Kong

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

The Hong Kong Association for the Mentally Handicapped
Duke of Windsor Social Service Building, Room 705
15 Hennessy Road, Hong Kong * 1972

Parents' Association of the Mentally Handicapped
288 A, Ma Tau Wei Road, 1st. & 2nd. Floor
Hunghom, Kowloon, Hong Kong * 1982

Society of Homes for the Handicapped
Level 204, Shopping Block
Lai Yiu Estate, Kwai Chung
New Territories, Hong Kong * 1982

* Associate members of the International League of Societies for Persons with Mental Handicap since this date.

In addition: Action Group for Aid to the Mentally Retarded, Hong Kong Sports Association for the Mentally Handicapped and several others.

Other Voluntary Organizations which Include Mental Retardation

There are over 30 such organizations and services including many sponsored by churches, councils of churches and other religious groups, social welfare associations, residential services, education, leisure time activities, medical, mental health and hospital services as well as social service centres, and organizations interested in employment opportunities.

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Early Identification and Assessment - The Comprehensive Observation Scheme in the 44 Family Health Centers provides five routine assessments for all infants between birth and the age of five. The main objective is to ensure all congenital or acquired defects are identified and treated as early as possible. Observation of children above the age of five is conducted in primary schools by the Education Department through the Combined Screening Programme. After disabilities are identified or suspected, assessment services are provided at two multi-disciplinary child assessment centres, 3 special education service centres and a few voluntary agencies with clinical psychologists.

Medical Care - At present, there are 500 hospital beds for people who are severely mentally handicapped. With the support of medical practitioners in private practice, a volunteer medical consultation scheme has been introduced in 1985 covering 24 special schools and 11 residential centres for physically disabled and severely mentally handicapped persons.

Education - Early intervention programmes are provided for children below the age of 2 who have been identified to have disabilities or developmental delays and for their parents. For mentally handicapped children from the age of 2 to 6, integrated programmes in ordinary child care centres or special child care centres are available. An experimental project of providing integrated programmes in kindergartens began in 1985. The government policy is to provide all disabled children, including the mentally handicapped irrespective of the degree of handicap, with nine years of free education. Mentally handicapped children are also encouraged to receive education in ordinary schools. Remedial and support services provided for these children include special class, resource class, resource teaching centres, adjustment units and peripatetic teaching service. Children who because of their disabilities cannot fully benefit from ordinary education are provided with places in special schools. At present, there are 35 special schools serving children with mild (2100), moderate (1490) and severe (504) mental handicaps.

Vocational Rehabilitation and Employment - There are at present 3 subvented and 2 government vocational training centres which aim at preparing the trainees with necessary skills and work habits for open employment. Assistance to mentally handicapped persons in finding employment is provided by a Centralized Selective Placement Service established in 1980 in Government's Labour Department. For those who cannot enter into open employment, sheltered workshops are available. For people with moderate or severe mental handicaps who cannot benefit from sheltered employment, work activity centres are available to provide simple work activities and training in social and independent living skills.

Financial Assistance - A disability allowance of $510 per month is provided without means tests to severely disabled persons including those who are mentally handicapped. A disability supplement equivalent to 50% of the disability allowance assists persons with disabilities receiving public assistance.

Residential Care - Residential care for school age children with moderate or severe mental handicap is provided in boarding facilities attached to special schools. For mentally handicapped adults who cannot look after themselves or have inadequate home background, homes (which could be attached to work activity centres, training centre or sheltered workshop) and hostels are available. A pilot project to provide temporary residential care for moderately and severely mentally handicapped persons was started in November, 1985.

Other Services in Social Rehabilitation - Independent living training, counselling, compassionate rehousing scheme, social and recreation activities and home help services.

Personnel Training - Social Work training is provided by the 2 universities and several other training institutes. An in-service training course for teachers of children with special educational needs is operated at Sir Robert Black College of Education. The Hong Kong Poly-technic also offers various courses for training of para-medical staff. Other courses on child care are also available.

Planning

The policy objective of Hong Kong's rehabilitation service, as stated in the 1977 White Paper, is "To provide such comprehensive rehabilitation services necessary to enable disabled people to develop their physical, mental and social capabilities to the fullest extent which their disabilities permit".

Subsequent to the release of the White Paper, a Rehabilitation Development Coordinating Committee (RDCC) was appointed by the Governor of Hong Kong to advise on the overall development of rehabilitation services and policies.

As a planning document of rehabilitation services, the Rehabilitation Programme Plan presents a comprehensive picture of the current provision of rehabilitation services in Hong Kong, and forward projections for the next ten years. The programme plan is reviewed annually by a Joint Committee of Government departments and voluntary agencies.

OTHER INFORMATION FOR VISITORS

Hong Kong Council of Social Service
Rehabilitation Division,
Room 1205
15 Hennessy Road, Hong Kong. (G.P.O. Box 474, Hong Kong)

School Holidays - Mid-July through August; 2 weeks at Christmas; 9 days Chinese New Year (usually in early February); Easter and Ching Ming holiday 9 days; 7 special one day holidays throughout the year.

H U N G A R Y *

The Hungarian People's Republic has a population of 10.6 million and its capital city Budapest, 2.1 million (1987 estimate). The language is Magyar, related to Finnish. About 2/3 of the population are Roman Catholic, most of the remainder Protestant. Hungary has an extensive social insurance system for employed persons and their families; medical benefits and family subsidies are included.

Public education is free and compulsory for 6 to 16 year olds; there are 91 institutions of higher education. Special education had its beginnings in Hungary in 1802 with a special school for the deaf and dumb. Before 1945 there were special school places for only about 2,000 pupils; over one and one half percent of the school age population is now receiving special education and special schools have been set up wherever three or more classes are needed. Otherwise, the special classes are part of the regular school.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Müvelödésügyi Minisztérium Közoktatáscügyi Fösztály Alsófoku Oktatási Osztály Szalay utca 10-14, Budapest V	Ministry of Education Department of Public Education Elementary Education Section Division of Special Education
Egészségügyi Minisztérium Szociálpolitikai Fösztály Anya- és Gyermekvédelmi Fösztály Akadémia ut 10, Budapest V	Ministry of Health Department of Social Policy Department of Mother and Child Care

Other official agencies

Fövárosi Anyavédelmi Központ	Municipal Center of Mother Care
Teratogenetikai Ambulancia Bakáts tér 10, Budapest IX	Out-Patient Department of Teratogenetics
Országos Közegészségügyi Intéset Genetikai Munkacsoport Gyáli ut 4, Budapest IX	State Public Health Institute Department of Genetics

Provincial agencies

Megyei Tanács Müvelödésügyi Osztäly és Egészégügyi Osztály	County Council Department of Education and Department of Health

Provincial agencies are in each of the 19 counties.

* Partial update.

National planning and coordination - This is the responsibility of the above ministries.

VOLUNTARY ORGANIZATIONS

Értelmi Fogyatékosok Országos Érdekvédelmi Szervezete (ÉFOÉSZ) V. Október 6, u. 22 1051 Budápest	National Association to Protect the Interests of Hungarians with Intellectual Handicap

Founded in 1981, the International Year of Disabled Persons, by parents and relatives, its membership includes also teachers and other professional workers. A primary goal is to promote the integration of citizens with intellectual handicaps into society, thus the question of employment is of special concern. Other areas deal with planning for the individual's future and with relationships in the community. A main responsibility of the Association is to represent the needs of people with intellectual disability before government and other social authorities. ÉFOÉSZ became a member of the International League of Societies for Persons with Mental Handicap in 1986 and maintains contacts especially with its neighbor organizations in Austria, Czechoslovakia, Poland and Yugoslavia.

The following organizations include concern for mental retardation:

Magyar Pszichológiai Tudományos Társaság Meredek utca 1, Budapest XII	Hungarian Scientific Association of Psychology
Gyógypedagiógiai Pszichológiai Szekció	Section for Psychology of the Handicapped
Orvosi/Klinikus/Szekció	Section for Clinical Psychology
Magyar Pedagógiai Társaság Gyógypedagógiai Szekciója Gorkij Fasor 10, Budapest VI	Hungarian Association of Pedagogy
Magyar Gyógypedagógusok Egyesülete Bethlen tér 2, Budapest VII	National Society of Medico-pedagogues
Magyar Rehabilitációs Társaság Frankel Leó utca 38-40, Budapest II	Hungarian Association of Rehabilitation
Magyar Vöröskereszt Arany János utca 31, Budapest V	Hungarian Red Cross

RESEARCH

Hungarian Academy of Sciences
Psychology Committee
Münnich Ferenc utca 7
Budapest V

Training College for Teachers of
Handicapped Children
Psychological Institute
Bethlen tér 2, Budapest VII

Division of Medicine
Roosevelt tér 9, Budapest V

Central Statistical Office
Demographic Research Institute
Csaba Ratey

Studies are also carried on by the Ministries of Health and of Education and other official agencies listed above.

PUBLICATIONS

Gyógypedagógia	Special Education
Gyermekgyógyászat	Pediatrics
Magyar Pszichológiai Szemle	Hungarian Review of Psychology
Ideggyógyászati Szemle	Review of Neurology and Psychiatry
Orvosi Hetilap	Medical Weekly
Népegészségügy	Journal of Public Health
Szocialis Gondoskodás	Social Care

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - There exists the possibility of casefinding at the network of child guidance clinics in most of the 19 counties. The Training College for Teachers of Handicapped Children maintains a central advisory out-patient clinic specifically responsible for diagnosis and care of handicapped children. The parent associations also provide counselling and information.

Education - Special education in Hungary is identified with "Heilpaedagogie" (curative education) and is an organic part of public education under the Ministry of Education. This compulsory education extends to handicapped children under separate programs for the mentally, physically, sight, hearing or speech handicapped, from 6 to 16 years of age. Below and above that age the handicapped are the responsibility of the Ministry of Health. The Act for Compulsory Education guarantees the right to learn. Classes for retarded children are organized on the "educable" and "trainable" levels, in schools, auxiliary schools and special classes adjoined to normal primary schools. There is much stress on pre-vocational training, particularly in the classes on the trainable level.

Work training, employment - Retarded persons over 16 years of age receive basic vocational training and employment in the Rehabilitation Center of the Ministry of Health (Majusegy ut 21, Budapest XIV). One of the Center's responsibilities is to organize other work training centers and sheltered workshops.

Medical care - All citizens of Hungary get medical care free of charge through facilities run by the Ministry of Health.

Residential care - Severely retarded persons (IQ under 30) are cared for in State Centers, while moderately and mildly retarded children may go to boarding schools, if no special class is available at their place of residence. Children are admitted to institutions or boarding schools only after several detailed examinations by a specialized team.

Financial assistance - Higher family allowances are paid to families with mentally retarded children. The handicapped person is also entitled to a special allowance.

Research - Research is carried out in many university departments and hospitals, as well as the Training College for Teachers of Handicapped Children, founded in 1900.

Personnel training - Teachers of handicapped children have a 4-year college level training program at the Training College in Budapest, or may follow a 5-year correspondence course.

Recreation, sports and leisure - ÉFOÉSZ makes it possible for as many as 1000 people to participate in annual holiday trips, with the help of other social and official organizations. The first national sports meet was organized in 1984 and was repeated in 1986.

OTHER INFORMATION FOR VISITORS

Visitors from abroad wishing assistance in planning visits of facilities should write to the Ministry of Education, the Ministry of Health, or to ÉFOÉSZ.

School holiday periods - The official school year begins on September 1 and lasts until June 10, with 2 weeks holiday for Christmas and another week holiday for Easter.

ICELAND

The Republic of Iceland (population 240,000) is an island of volcanic origin in the North Atlantic with a moderate climate in summer and winter thanks to the warming effect of the Gulf Stream. Althing, the oldest parliamentary assembly in the world, celebrated its 1,000th anniversary in 1930. The Icelandic language is closely related to Old Norse and, in contrast to the other Nordic languages, has undergone little change through the centuries.

The educational system provides for 9 years of compulsory schooling and there is virtually no illiteracy. Iceland has several colleges and a state university. The State church is Evangelical Lutheran and more than 90% of the population belong to it. The first specialized facility for mentally retarded persons was a private home for children opened in 1930. A law adopted 6 years later authorized the state to provide training, treatment and care, including a residential institution for profoundly retarded persons, residential work centers for adults, and school homes for mildly retarded children. According to 1974 studies of the Department of Health, 0.61% of the population was estimated to be mentally retarded.

New legislation in 1979, revised in 1983, the Act on Affairs of the Handicapped (mentally or physically disabled persons) came into force in 1984 "to ensure to them equality and living conditions comparable with those of other citizens and to provide them with conditions that enable them to lead a normal life and to establish themselves in society in a position where they manage most successfully." The influence of the federated organizations of the handicapped and their support associations is guaranteed by the new law in the process of decision making and execution of plans and regulations, through a special Interministerial Steering or Management Committee responsible for overall coordination and planning of services. It consists of 7 members, one each from The Ministries involved, one from The Association of Local Authorities, and 3 from the organizations of the handicapped. The eight regional boards have similar local representation and are responsible for planning and overseeing the direct services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Three ministries have responsibilities under Affairs of the Handicap Act; health services including medical rehabilitation belong under the Ministry of Health and Social Security; education and pedagogical issues under the Ministry of Education; social habilitation and rehabilitation, employment issues and others under the Ministry of Social Affairs which has overall charge.

Félagsmálaráduneytid Deild um málefni fatladra Hafnarhúsinu, Tryggvagötu 101 Reykjavík	Ministry of Social Affairs Division of Handicap Affairs
Heilbrigdis og tryggingamálaráduneytid Laugavegi 116, 105 Reykjavík	Ministry of Health and Social Security

Menntamálaráduneytid Sérkennslufulltrúi Hverfisgötu 6, 101 Reykjavík	Ministry of Education Office for Special Education

Planning and Coordination

Stjórnarnefnd um málefni fatladra Hafnarhúsinu, Tryggvagötu 101 Reykjavík	Management Committee on Handicap Affairs

VOLUNTARY ORGANIZATIONS

Landssamtökin Throskahjálp Nóatúni 17 105 Reykjavík	National Federation for the Aid of the Disabled (NFAD) (includes people with mental handicap)

The Federation was formed in 1976 by thirteen parent and professional associations to unite their efforts and work in collaboration with state authorities. It has now 26 member associations, including professional organizations (e.g. developmental therapists and ergo therapists, psychologists and special education teachers), altogether a membership of some 6000 persons. The Federation had an important influence on bringing about the new legislation, having been active on the legislative committee. Both NFAD and IFH, the Federation of the Handicapped, are represented on the Interministerial Management Committee for the Affairs of the Handicapped and on the 8 Regional Boards.

Öryrkjabandalag Islands Hatún 10, 105 Reykjavík	Iceland Federation of the Handicapped IFH - founded 1961

IFH consists of 14 associations of handicapped persons (e.g. blind, physically handicapped, etc.). Two associations are members of both Federations.

RESEARCH

Háskóli Islands v/Sudurgötu, 101 Reykjavík	University of Iceland
Kennaraháskóli Islands v/Stakkahlid, 105 Reykjavík	Iceland Institute for Education (Teachers University)

PUBLICATIONS

Tímaritid Throskahjálp Nóatúni 17, 105 Reykjavík	Published quarterly by NFAD

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - The local health authorities and physicians in the eight regions carry first responsibility. Toy libraries and developmental therapy services assist parents. To the extent possible, services for the general public shall be available to persons with handicaps. There is emphasis on early diagnosis, neonatal surveillance and preliminary assessment as soon as there is suspicion of a handicap of any kind. Referrals can be made to the State Diagnostic and Counselling Center, under jurisdiction of the Ministry of Social Affairs and its Management Committee for the Affairs of the Handicapped.

Education - all mentally handicapped children are entitled to education from the ages of 4 through 19. Except for some classes for slow learners and mildly handicapped children in regular schools, education is still mainly provided in special settings although integrated schooling is beginning to be available for pre-school children. Day training centers are provided and many children living too far away often stay with foster families. A special day school has been run by the Parents Association in Reykjavik since the early 1960s.

Residential Care - except for the two state institutions, the larger having under 200 residents, the majority have between 50 and 70. The latest development are group homes with 5 to 10 people, some consisting however of several apartments with 2 to 3 in each.

Work Training and Employment - primarily still provided in the institutions, but some sheltered workshops are available.

Financial Assistance - private institutions are subsidized by the State. Parents with children living at home receive financial support and handicapped persons over the age of 16 receive full disability pensions, whether living at home or in a group home.

Research - The Ministry of Social Affairs has initiated research and contracted with researchers, mostly within the Department of Social Sciences at the University of Iceland. The Genetics Laboratory of the University is involved, and at the Teachers University a study of preschool integration has been carried out.

Personnel Training - While the Teachers University has had courses in special education since 1971, until a few years ago students were obliged to go abroad to complete the final degree course. This was the case also with occupational and physical therapy, and is still necessary for the graduate degree in psychology. A three year college course prepares direct care workers, known as developmental therapists.

Planning and Coordination - as noted above, this is carried out on two levels through the Management Committee of the Affairs of the Handicapped on the national level, and the 8 Regional Boards responsible locally. In most of the 8 Regions there are a variety of services, differing one from another, depending on the population needs. Iceland has a small population for its area, and travel is frequently a problem. The goal is to provide services where the people live.

OTHER INFORMATION FOR VISITORS

Information may be obtained from the Division of Handicap Affairs of the Ministry of Social Affairs, or from Throskahjálp.

School Holidays - are from the 30th of May until the 1st of September.

INDIA

India is a land of great contrasts, with a population of over 684 million, 76 percent living in rural areas. It is a centrally administered union of 22 states and 9 territories; Hindi is the official language, spoken by one third of the people, English is an associate language and there are some 14 other main languages. Literacy is estimated at about 35 per cent. Despite the many serious problems facing India at this time in her long history, mental retardation and other disabilities are receiving attention in both governmental and voluntary sectors. The establishment in 1984 of National Institutes for the four disabilities (Mental, Visual, Hearing and Othopedic Handicaps) is providing a new network of demonstration services, research and personnel training. There are more than 220 institutions and special schools, many of the latter run by voluntary societies of parents, teachers and social workers, with financial subsidies from state or, occasionally, central government sources.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Central Government

Ministry of Welfare Shastri Bhavan New Delhi - 110 001	Responsible for special education, training and rehabilitation of persons with mental retardation.
Ministry of Health Nirman Bhavan New Delhi	Responsible for diagnosis, treatment and guidance.
Ministry of Education Shastra Bhavan New Delhi 110 001	Responsible for integrated education of handicapped children in regular schools.

State Governments

In each State the Departments of Health, Education and Welfare are concerned with treatment and rehabilitation; diagnostic and treatment services are provided through the various hospitals and clinics. Long term care institutions and residential schools receive support and supervision from Directorates of Welfare under Ministries of Education or Welfare.

Planning and Coordination - The National Advisory Council for the Handicapped, consisting of representatives from the State Governments and voluntary organizations, as well as experts appointed by the Ministry of Welfare, prepares plans for rehabilitation at the national level. The National Planning Commission consults with the Ministry of Welfare in carrying out the overall planning for development of the country as a whole.

VOLUNTARY ORGANIZATIONS

Federation for the Welfare of the Mentally Retarded (India), - FWMR
Shaheed Jeet Singh Marg., Katwaria-Sarai, New Delhi-110 067
FWMR (est. 1966), is a national voluntary organization with membership

consisting of individuals and associations plus institutions and special schools. The Federation has worked to coordinate services and encourage development of an effective network of facilities. In recent years it has been less active on the national and international level; in view of the country's size and diversity it is not surprising that plans for the establishment of new organizations have been announced:

National Forum for the Welfare
of Mentally Handicapped
Thakur Mansion
6/3 - 682/A Greenlands Road
Hyderabad - 500 482

Consortium on Mental Handicap
c/o Samadhan, J-32, South Ext., Pt.-1
New Delhi 110 049

Parent sponsored associations exist in many states; among the more active are those in Bangalore, Calicut, Mysore, Secunderabad and Hyderabad.

RESEARCH

Both central and state government Departments of Health Education and Welfare are involved, in addition:

Indian Council for Medical
Research (ICMR)
New Delhi - 110 029

All India Institute of Medical
Services (AIIMS)
New Delhi - 110 029

National Institute of Medical
Health and Neuro-Sciences
(NIMH & NS)
Bangalore - 560 029

National Institute for the Mentally
Handicapped, Bowenpalli
Secunderabad - 500 026

Indian Council for Social Science
Research
New Delhi - 110 001

National Council for Educational
Research and Training
New Delhi - 110 016

PUBLICATIONS

Indian Journal of Clinical Psychology - published by the Indian Association of Clinical Psychologists (half-yearly).

Indian Journal of Psychiatry - published by the Indian Psychiatric Society (quarterly).

FWMR Newsletter - published by FWMR.

Journal of Rehabilitation in Asia - published by the Nimbkar Rehabilitation Trust, Bombay.

The Retarded - published by Alekendu Bodh Niketan, Calcutta (quarterly).

In addition are newsletters published by other service agencies and volunteer groups.

Directories: A directory of existing facilities is published by the National Institute for the Mentally Handicapped, including special teacher training programs and information on the National Institutes.

BRIEF DESCRIPTION ON PROGRAMME AREAS

Case Finding, Diagnosis and Assessment, consultation to parents - usually parents go to a general hospital for consultation and, if advised by the medical practitioner, the children are examined by specialists in the departments of pediatrics, psychology, psychiatry, neurology. These services and those provided in educational assessment clinics are rarely available outside the larger cities. The National Institutes provide multidisciplinary assessment and consultation services also, with specific emphasis on parent training both in rural and urban areas.

Education - There are about 214 facilities for mentally retarded persons; most (160) provide some education and training, particularly in various kinds of handicrafts. In recent years a limited number of special classes for mildly retarded children have been established in regular schools. Some of these have a program of integrated classes. There are many projects under way which include setting up of special schools with workshops (25) and rehabilitation and vocational centers (65). 102 have pre-vocational training centres.

Work Training and Employment - Some schools (57) have handicraft training which includes loom weaving, carpentry, preparation of spices for cooking, tailoring, binding, etc. Recently such crafts have found a limited market. There are few (25) specialized sheltered workshops for the mentally retarded as such, but a number of workshops for the disabled are now including some mentally retarded persons as well. The Special Employment Exchanges for the Handicapped are beginning to include some mentally retarded persons in their program.

Residential Care - While mentally retarded people have been accepted in some nursing homes and homes for destitute persons, India's extended family system has meant they were generally cared for at home. The first residential home for retarded children opened in 1941 as a special unit of a home managed by the Children's Aid Society of Bombay. This was followed in 1944 by the establishment of a School for Children in Need of Special Care, under private auspices, also in Bombay. The large increase in facilities has mainly taken place since the mid-1960's. By 1966, there were 51 institutions which rose to be 91 by the year 1973.Currently there are 121 non-residential and 34 residential institutions. 53 provide both type of services.

Community Care - The Integrated Child Development Scheme (ICDS) initiated on an experimental basis in 1975, has now become a national programme. It attempts to provide in the age range of 0-6 years and expectant and lactating mothers with the facilities to improve the nutritional and health status; reduce the incidence of mortality, morbidity and malnutrition; provide nutrition and health education; lay the foundation for a proper psychological, physical and social development of the child and achieve effective coordination between departments of health and welfare. The functionaries of the ICDS are the Anganwadi workers (AWW) who over the last few years have been involved in the care of mentally retarded persons.

An ICMR sponsored project at a district in one of the States, (Andra Pradesh) trained and evaluated the efficacy of AWW's in the identification, referral and management of mentally handicapped persons in the community. The National Institute of Mental Health and Neurosciences has also undertaken the task of training AWW at various rural centres in managing mentally handicapped persons. The above national programme has initiated a movement for the community based care programmes. Since 1981, parental self-help groups have also emerged though their number is still very small. Village rehabilitation workers will eventually play an important role with the older child and adult having a disability.

Medical Care - Some (36) of the institutions have a medical officer and some others (124) have diagnostic clinics attached. Speech, occupational and physiotherapy facilities are provided by 72 institutions. 16 institutions have an exclusive mental retardation clinic for initial screening and diagnostic purposes.

Financial Aid - There are two institutions for the mentally retarded which are completely under the Central government (New Delhi). Institutions wholly run by State governments (19) have increased, while quite a few (50) are partly aided by State governments. The rest (136) are managed by voluntary organizations and a few are run by service oriented welfare clubs. Voluntary organizations receive financial assistance from donations, both from the public and private philanthropists, as well as grants-in-aid from the Central government and State governments. Funds are also raised from member subscriptions.

Research - Medical-biological research is being carried on in some of the major medical centers and hospitals; and studies in the educational and social areas are being conducted in a number of institutions, including schools of social work. It is felt, however, that major emphasis must be put on provision of services and man power development considering the limitation of funds. FWMR has compiled a bibliography of research done in the field of mental handicap with recommendations concerning the future directions needed. The NIMH conducts and coordinates research, particularly in the area of community care with special interest in rural areas.

Personnel Training - There is much effort to provide diploma courses for teachers who have been working without specialized training; this is given by some teacher training colleges and through the four regional training centers of the NIMH (Secunderabad, Calcutta, Bombay and New Delhi). A three year university accredited, multidisciplinary degree course is also available (B.A. in mental handicap specialty).

OTHER INFORMATION FOR VISITORS

Requests may be directed to the National Institute for the Mentally Handicapped, Manovikas Nagar, Bowenpalli, Secunderabad 600 011 or the Federation for the Welfare of the Mentally Retarded.

School Holidays - Most schools in the north are closed from mid-May to mid-July; those in the south from mid-April to the end of June, and again in December; number of days depends on individual institutions.

INDONESIA

Indonesia, with about 13,000 islands of which 3,000 are inhabited, has a population (1985) of 160 million. The island of Java is one of the most densely populated areas in the world. While a great variety of races and religions are represented, 90% of the people are Muslim. The capital city is Jakarta; the official language is Bahasa Indonesia. A Dutch overseas territory for about 150 years, independence was proclaimed in 1945.

Social welfare services have developed slowly, but in planned fashion. Indonesia is now in its fourth five-year plan. Social insurance is limited to a very restricted health insurance for certain groups of employees and a similarly restricted work injury compensation scheme. There is compulsory primary education for children 6 to 12 in age, and the literacy rate is more than 60%. To provide the means for the very poor, people with more resources are requested to become foster parents (orangtua asuh). The total estimate of mentally retarded children is about 2%, or 2.6 million children. Of these, about 20,000 are in schools and receive other institutional care. Actual statistics are unreliable since mental retardation has often not been acknowledged and reported until recently. Rural medical centres play an increasing role in sanitation, information and prevention. The care for mentally retarded persons would develop well if financial support were available.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Departemen Pendidikan dan Kebudayaan Jakarta	Department of Education and Culture
Bagian untuk Pendidikan Luar Biasa	Section for Special Education
Bagian Pendidikan Guru untuk Anak Anak Cacat	Section of Training of Special Teachers
Badan Koordinasi Sekolah Sekolah Swasta untuk Anak Anak Cacat	Coordination of Private Schools for Handicapped Children
Departemen Kesehatan Jakarta	Department of Health
Departemen Sosial Jakarta	Department of Social Affairs
Direktorat Rehabilitasi	Directorate for Rehabilitation
Bidang Kesejahteran Rakyat	Department of Social Welfare

Coordinates the activities of the other government agencies relating to handicapped persons.

VOLUNTEER ORGANIZATIONS WHICH INCLUDE CONCERN FOR THE MENTALLY RETARDED

Dewan Nasional Indonesia Untuk Kesejahteraan Sosial (DNIKS) Chairperson: Mrs. J.S. Nasution Jl. Teuku Umar 42/ Jakarta-Pusat	National umbrella organization covering all national volunteer organizations related to social welfare, including care and education for exceptional children.

Badan Pembina Koordinasi Karjasaman Sosial (BPKKS) Addresses according to region	Regional umbrella organizations covering organizations related to social welfare, including care for various handicaps.
Badan Kerjasama Panti Asuhan c/o Mrs. Nasution, Chair Jalan Prof. Moh. Yamin 5, Jakarta	Coordinating body of volunteer agencies concerned with orphanages.
Yayasan Pemeliharaan Anak Cacat c/o Mrs. D. Soeharso, Secretary Jalan Overste Slamet Riyadi Surakarta	Indonesian Society for the Care of Crippled Children

Concerned primarily with mental retardation

Federasi Nasional untuk Kesejahteraan Penderita Cacat/ Terbelakag Mental 32, Jl. Jend. A. Yani, Magelang	National Federation for the Welfare of the Mentally Handicapped President: Mrs. T. Sadjiman

The National Federation, established in 1967, includes both governmental agencies and voluntary societies as members. The Federation promotes coordination and cooperation among its members, as well as between the Federation and all agencies working for the welfare of the mentally retarded. It attempts to establish foundations, orphanages and boarding schools for special education and vocational training. Parent associations are related to every school. The government helped organize these parent associations to assist with extra curricular activities. The Federation has been a member since 1972 of the ILSMH.

Yayasan Sumber Asih Chair: Mrs. J.M. Rumambikolpita Jl. Proklamasi 79/ Jakarta-Pusat	Volunteer Foundations Focussing on care, education, and prevocational instruction for mentally handicapped children. They are members of DNIKS.
Dewan Pengurus Yayasan Asih Budi President: Mrs. R.A. Aryanto Jl. Mendut 13/ Jakarta-Pusat	

PUBLICATIONS

New Horizons - a quarterly review of rehabilitation, in English, issued since 1964 by the Rehabilitation Center in Solo, Surakarta, occasionally includes information on mental retardation.

Berita Sumber Asih - published by Yayasan Sumber Asih.

The National Federation for the Welfare of the Mentally Handicapped regularly issues brochures on mental retardation and on the Federation's activities.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Children are assessed and referred to available services by general practitioners and pediatricians and where possible, by other appropriate services. Before acceptance at the schools of Sumber Asih and Asih Budi, for example, each child is tested at the Department of Psychology of the University of Indonesia, and continuing evaluation is carried on by a team of consultants. Consultation to parents is considered an important function of the various groups providing services. The system of village medical centres, "Puskesmas" (Pusat Kesehatan Masyarhal), which are also information centres for family planning, increasingly provide pre-natal care, prevention, simple preliminary diagnosis, and other services that lead to better prevention and care for mentally handicapped people.

Education - Before 1960, two day schools were opened under voluntary auspices in Jakarta: Sumber Asih (Jalan Patimura 5), for moderately and severely retarded children, and Asih Budi (Jl. Mendut 13), for mildly retarded children. In the following years, an increasing number of schools have been established under public and private management in different parts of the islands. Much attention is paid to social training and skills. Class size is kept small, with 8 to 12 in a group.

Work Training and Employment - Prevocational training is emphasized in the schools to promote skills, and some articles are for sale. There is little experience yet in providing jobs to school leavers; in a developing country where many educated and over-educated young people cannot find employment, this is a particular problem. The sheltered workshop Budi Karya (Jl. Cimandiri 32, Jakarta) provides employment for deaf, mute and mentally retarded persons.

Residential Care - There are at least 112 boarding schools over all of Indonesia for mildly retarded children, and six for moderately and severely retarded children. The first effort to provide special care for profoundly retarded children was made in 1968 for 25 children by the society of "Panti Asih" in Pakem Jogjakarta, now serving nearly 90 children. Another residential school, "Rindang Kasih" in Magelang, was founded in 1962 and presently serves 60 children. This is a demonstration project supported by the National Federation for the Welfare of the Mentally Handicapped.

Parents Organizations - Efforts are made to organize parents of children who receive institutional care or special education to provide informative support and extracurricular activities. In Jakarta, such an organization has been called "Permata," or jewel (parents value their children as a treasure), uniting parents of Asih Budi, Sumber Asih, and Budi Karya.

Financial Assistance - The Department of Social Affairs provides a per capita subsidy of 300 rupees a day on request for public schools and nominated residential homes, and about 300 rupees for private ones. Most must depend heavily on additional private donations and fees from parents. Dharmais, the special presidential foundation (Pres. Suharto is its head), also gives similar funding on request.

Personnel Training - Academic training for special education is provided at the I.K.I.P. University in Yogyakarta, Surabaya, Jakarta, and Bandung. The Bandung special education teachers training college, SGPLB - "Schol a Guru Pendidikan Luar Biasa" (Jl. Cipaganti 146), includes a semi-governmental boarding and day school for children with special needs, including moderately and severely as well as mildly retarded children. Teachers and buildings are provided by the government, and maintenance is from private sources. Similar teacher training colleges exist in Yogyakarta, Solo, Surabaya, Ujung Pandang (Sulawesi), and Padang (Sumatra). Consultation in training teachers has also been received through the Dutch Werelddiakonaat and the Dutch Protestant Parent Association "Philadelphia" which conducts a 2-year training course sponsored by Sumber Asih. Courses given by the Rehabilitation Center in Surakarta include mental retardation.

Research - Major research institutions exist both for the Department of Education and Culture (in Jakarta) and for the Department of Social Welfare (in Jogjakarta) which has carried out a pilot project for rehabilitation of the retarded in Central Java.

Planning - In addition to cooperation with government agencies, the National Federation and its 115 member societies work with such other voluntary organizations as the National Council of Social Welfare, the coordinating board of voluntary agencies concerned with orphanages, the Society of Teachers of Schools for Mentally Handicapped Children and the Council of Churches Health and Social Welfare Committee. A 5-year plan of action set up by the Federation for 1975-80 included two demonstration projects in rehabilitation and in medical care and research; 7 pilot programs are carrying out the findings. The 1985-90 plan proposes to enhance the quality of special teachers; increase funding to institutions and schools; provide transportation and more sheltered workshops. Planning for all special education is done in coordination with and in the context of similar activities of ASEAN (Association of Southeast Asian Nations) including some funding from Australia, e.g. various regional conferences and workshops which have been coordinated by Indonesia.

OTHER INFORMATION FOR VISITORS

Information may be obtained from the National Federation for the Welfare of the Mentally Handicapped, the Section for Special Education of the Department of Education and Culture, or the National Council for Social Welfare (DNIKS).

Annual School Holidays - are during the month of Ramadan.

IRELAND

About 45% of the population of 3 million is non-urban. For many years emigration was high and there was a declining population rate which has reversed since 1961. Today almost 50% of the population is under 25 years of age. Gaelic (Erse) and English are official languages.

Education between the ages of 6 and 14 is free and compulsory. Secondary education is also free and available to everyone but it is not compulsory. Health services are well developed and for lower and middle income groups needed services are free or at moderate charges. The Social Welfare Act of 1952 provides an insurance program; a voluntary health insurance scheme is available for upper income groups. Rehabilitation services for the physically disabled, the blind and the deaf are well developed.

There is no special separate legislation dealing with the mentally handicapped who are included under the provisions related to general health, education and welfare services. The definition of mental handicap, as adopted by the governmental Commission of Inquiry in 1965, includes "those who by reason of arrested or incomplete development of the mind, have a marked lack of intelligence, and either temporarily or permanently, inadequate adaption to their environment," a statement implying that with care, treatment and education many handicapped persons will be able to live socially independent lives. A four-level terminology is used - mild, moderate, severe, and profound. Until 1975 special services were based almost entirely on residential centers; since then community-based programs have been increasingly provided.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Health
Custom House, Dublin

Department of Education
Marlborough Street, Dublin

Department of Social Welfare
Aras Brugha, Dublin

Department of Labour
Mespil Road, Dublin 4

The majority of direct service programs are carried out by private agencies, primarily religious orders and more recently, voluntary bodies, with financial support from national and local authorities and voluntary fundraising. Local and district health authorities provide certain direct services.

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation / Citizen and Professional

The National Association for the Mentally Handicapped
  of Ireland (NAMHI)
5 Fitzwilliam Place, Dublin 2

The NAMHI, established in 1961, is a federation of individual members and representatives of the 156 national, district or local organizations that provide direct services or support to persons who are mentally handicapped. These are associations of parents and friends, religious orders, national professional associations of physicians, nurses, teachers and social workers, rehabilitation organizations, trade unions and general educational or community service oriented organizations. Since 1964 the NAMHI has been a member of the International League of Societies for Persons with Mental Handicap and in 1975 hosted its 6th World Congress in Dublin. In August, 1988, NAMHI hosted the 8th Congress of the International Association for the Scientific Study of Mental Deficiency.

Other National Organizations With Related Concern

The National Rehabilitation Board
25 Clyde Road
Dublin 4

Mental Health Association of Ireland
2 Herbert Ave.
Merrion Road, Dublin 4

Union of Voluntary Organizations
for the Handicapped
29 Eaton Square
Monkstown,
Co. Dublin.

RESEARCH

The Medico - Social Research Board
73 Lower Baggot Street
Dublin 2

St. Michael's House Research Dept.
Kilmacud Road
Stillorgan, Co. Dublin

The Children's Hospital
Temple Street
Dublin 2

Our Lady's Hospital for Sick
Children
Crumlin
Dublin 12

PUBLICATIONS

Journals Which Include Articles on Mental Retardation

Caritas Hospitaller Order of St. John of God "Granada" Stillorgan, Co. Dublin	Quarterly journal
Impact Brothers of Charity 52 Terenure Road East Dublin 6	Journal on mental handicap
Journal of the Irish Medical Association 10 Fitzwilliam Place Dublin 2	
Progress Cork Polio and General After-Care Ass'n "Bonnington" Monetonette, Cork	Newsletter

Directory - "An Outline of the Existing Services for Treatment and Care of Mentally Handicapped and Disturbed Children and Mentally Handicapped Adults in the Republic of Ireland" (8th Edition, 1981, 64 pages) published by NAMHI.

BRIEF DESCRIPTIVE NOTES

Case Finding, Diagnosis and Assessment, Consultation to Parents - These services are normally carried on at children's hospitals, local child welfare clinics, and at child guidance clinics where psychiatrists, psychologists, consultants, pediatricians and social workers are available. In rural areas children are referred to the regional pediatric service. Parents may consult the clinics or centers, residential or day, which serve the mentally retarded and have specialist consultant staff. The NAMHI gives advice and guidance to parents through its informational program and publications.

Education - Education is entirely the responsibility, in terms of finance, of the Department of Education, but is usually administered by the voluntary bodies. There are more than 60 special schools, day and residential, ranging in size from 25 to 200 pupils, recognized as part of the national school system. They serve approximately 5,000 mildly and moderately handicapped children. (Classes for "slow learners" are within the ordinary primary schools; such children are not designated mentally handicapped.) Rules governing the admission of pupils to special schools are flexible and transfers from one type to another are easily arranged without any administrative formalities.

Work Training and Employment - Vocational and social training is emphasized during later school years. Voluntary organizations maintain training workshops in connection with day schools; various residential centers have developed rehabilitation and placement programs in cooperation with the National Rehabilitation Board, which provides a special employment service for handicapped youth. Sheltered employment exists primarily as part of the residential centers' program. The Department of Labour provides a re-training scheme for handicapped and redundant workers - Anco Training Authority, Mespil Road, Dublin 4.

Medical Care - is provided through the usual channels as well as under the aegis of the various voluntary bodies which serve persons with mental handicap.

Residential Care - Residential care provided by religious orders and voluntary organizations is increasing, although the numbers of adults in district mental hospitals in 1985 was still about 28% of those in residential care. Among the voluntary organizations providing larger residential programs are:

The Sisters of Charity of St. Vincent
de Paul
St. Vincent's, Cabra, Dublin

The Hospitaller Order of St. John
of God
"Granada," Stillorgan, Co. Dublin

The Brothers of Charity
52 Terenure Road East
Dublin 6

The Sisters of Charity of
Jesus and Mary
Delvin, Co. Westmeath

Stewart's Hospital (since 1870)
Palmerstown, Co. Dublin

The Sisters of La Sagesse
Cregg House, Sligo

The Cork Polio and General After-Care Association
"Bonnington," Montenotte, Cork

Financial Assistance - Voluntary organizations providing residential services are financed by central government capital grants for new buildings and additions, and from the weekly maintenance rate paid by the local health authority of the home district from which the case is referred. Costs for schooling, including transportation, are the responsibility of the Department of Education. Disabled Persons Maintenance Allowances are paid to handicapped adults (persons over 16 years) not in residential care. Domiciliary Allowance is paid to mentally handicapped children who are maintained at home and who require constant care.

Recreation - Voluntary associations with residential and day programs assist in recreation plans in various ways, including outings and special fund raising for recreational purposes. Several holiday homes have been so provided.

Research - The Medico - Social Research Board (MSRB) has a mental handicap research department which published its second comprehensive Census of Mental Handicap in the Republic of Ireland in 1981 and has several current research projects. The two major pediatric hospitals continue research and there are ongoing projects by individual researchers and in different mental handicap centres. A member of the MSRB has carried on a study for W.H.O. of research projects in various countries.

Personnel Training - A special teaching course of 9 months is added to the ordinary teacher training level. About half of the teachers employed have had specialized training either in Ireland or the U.K. Since 1960 a special diploma in-service course for qualification, over a period of 3 years, in nursing for the mentally handicapped has been in existence. University courses in mental handicap are available for psychologists and physicians.

Planning - From 1961 to 1965 a government Commission of Inquiry into Mental Handicap, appointed by the Minister of Health, with multi-disciplinary representation, made an exhaustive study resulting in 96 main recommendations, many of which dealt with planning, coordination and extension of services. In the private field, the NAMHI has a continuing concern for overall planning of services.

OTHER INFORMATION FOR VISITORS

Either the Department of Health or the Department of Education would arrange a program for an interested visitor. The Hospitaller Order of St. John of God, the Sisters of Charity of St. Vincent de Paul or the Brothers of Charity could also do this. The National Association for the Mentally Handicapped of Ireland will also help visitors.

School Holidays - occur from approximately 20th of December to the 6th or 7th of January; for about a fortnight around Easter and from the middle of July to the 3rd of September.

ISRAEL

Israel has a population of 4.5 million (1985); about 750,000 are non-Jews, mostly Arabs of Moslem and Christian faiths. Official languages are Hebrew and Arabic. Education is free and compulsory from age 5 to 16 years, and free from age 16-18. There is a large variety of forms of secondary education training, and many education and training programs are available for adults.

Social services are provided by central and local authorities as well as by semi-public and voluntary agencies. Since 1954, under the National Insurance Law, assistance has been increasingly available in the form of old age and survivors pensions, disability benefits and maternity and family allowances. Most of the population is covered by health insurance.

A school for retarded children was started in Tel-Aviv in 1929, followed by other isolated pioneer efforts. With the setting up in 1950 of the Special Education Division in the Ministry of Education, special school and special class programs multiplied and the number of pupils grew from 2000 to 45,000 by 1975. In 1962 the Ministry of Social Welfare established the Service for the Retarded, with responsibility to provide general direction to existing facilities and to initiate new services and facilities, and from 1969, to require local authorities to carry out appropriate services. Multidisciplinary diagnosis boards were established, and cases are reviewed at least once every 3 years, with provision for appeal. In 1975 the government adopted a General Invalidity Insurance Law for all disabled and incapacitated persons, including persons who are mentally retarded, providing monthly pension, rehabilitation services and personal home services, including persons from 3 years onwards.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

The Ministry of Labor and Social Affairs (combined in 1978)
The Service for the Retarded — Hasherut Lamefager
23 Ben Yehuda St. Jerusalem

Ministry of Education and Culture
Division of Special Education — Hamador Lechinuch Meyuchad
20, Manila Street, Jerusalem

Ministry of Health

Mental Health Service — Sherut Bri'ut Hanafesh
Ben Tabei 9, Kiriyat Yovel, Jerusalem

Division of Maternal and Child Health — Hayachida Levriut Haem Vahayeled
3, Ben Tabai, Kiriyat Yovel, Jerusalem

Local education, health and social affairs authorities provide direct services to mentally retarded persons in cooperation with the above national governmental agencies and with voluntary organizations.

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

Israel Association for the Scientific Study of Mental Deficiency
c/o Prof. Bernard Cohen, Tel-Hashomer Hospital, Ramat-Gan

AKIM - Israel Association for the Habilitation of the Mentally Handicapped
(Ha'Aguda Lekimum Mefagrim) 69 Herzlia Road, Tel-Aviv 69410

AKIM was founded in 1951; through its 46 branches the membership of parents, volunteers and professionals provide a range of services of day care centers, kindergartens, sheltered workshops, social clubs and hostels, as well as apartments. It was one of the first national parent associations to provide professional social work counseling, still an important function of the organization. AKIM became a member of the International League of Societies for the Mentally Handicapped in 1962 and hosted its 4th Congress in 1968 at which the Declaration of General and Special Rights of the Mentally Retarded was adopted, October 24th, in Jerusalem (adopted by the United Nations in 1971).

Other National Voluntary Organizations which Include Mental Retardation

American Joint Distribution Committee (JDC) Joint Hill (Near Hebrew University) P.O. Box 3489, Jerusalem 91034	Provides consultation and financial support in the area of social services.
Association for Handicapped Children (ILAN) 9 Gordon Street, Tel-Aviv	Deals primarily with physical disabilities; maintains day centers for severely retarded children with cerebral palsy.
Youth Aliyah P.O. Box 92, Jerusalem	Responsible for the absorption program of thousands of immigrant children; its concern has now extended to the socio-cultural problems of retardation.
Israel Rehabilitation Society 18 David Elazar St., Tel-Aviv 61909	Includes mental retardation in its conferences and annual publications.

RESEARCH

The research divisions of the concerned Ministries have included projects on mental retardation. In addition are the following:

Research Committee of the National Rehabilitation Council

Paul Baerwald School of Social Work, Hebrew University, Jerusalem

The Henrietta Szold Institute- National Institute for Research in the
Behavioral Sciences, Kiryat Menachem, Jerusalem

Youth Aliyah Child Guidance Clinic and Research Unit
6 Karmon Street, Beit Ha Kerem, Jerusalem

PUBLICATIONS

There is no specialized professional journal of mental retardation; among the many which include articles on mental retardation are:

Be'Avoda U'birvacha - bimonthly for Social Affairs

Megamot - The Henrietta Szold Institute, National Institute for Behavioral Sciences

Yedion - a monthly, Za'adim twice a year; AKIM Review a newsletter in French, English and German, (1 - 2 times a year) for overseas friends and supporters, all published by AKIM.

Hachinuch Hamayuchad - bimonthly published by the Division of Special Education, Ministry of Culture and Education.

Special Education and Rehabilitation, Haifa University, School of Education.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Pediatric screening examinations are made before a newborn baby is discharged from the hospital and continuous health supervision covering about 90% of all children through early childhood is carried out in the Family Care Stations. Genetic Counseling Clinics function in most medical centers. A network of 16 Child Development Centers provide diagnosis, psychotherapy and clinical care to young exceptional children and their parents referred mainly by the Family Care Stations.

Every local authority maintains a local social affairs bureau to deal with the community's welfare needs, including mental retardation. The social workers make the first investigations and submit a detailed report to the Service for the Retarded, which sends the case to one of the diagnostic centers. In 1957, AKIM employed its first social worker and now maintains 16 consultation centers, working in close cooperation with the authorities concerned.

The School Psychological Services (Shefi) are responsible for detection and selection of children in need of special education.

Education - The education law of 1949 established the right of all children between 5-14 years of age to receive free kindergarten and elementary school education, including the provision of training facilities for all children in this age group should they, by virtue of their handicap, be unable to benefit from the normal school system. In 1980 the law was extended to include youths between 14-16 years (compulsory) and 16-18 years (free).

Classes for mildly retarded pupils are provided within the regular schools or in special schools; classes for the moderately retarded are mainly in day care centers run cooperatively by the local authorities, the Ministry of Education and the Ministry of Labor and Social Affairs (which provides attendants for the afternoon hours). Teachers are also provided for supplementary education classes in the vocational rehabilitation centers. Education programs in many of the residential homes are subsidized and supervised by the Special Education Division. AKIM has initiated specialized Kindergartens, sponsored the first day nursery in Jerusalem to serve Arab families with retarded children and initiated the first day-care center for severely retarded persons.

Work Training and Employment - is provided through the vocational habilitation centers - "Ma'as" - run by local authorities and/or by AKIM. Successful workers become candidates for jobs on the open market.

Medical Care - is provided both to open and to residential settings. Children living outside residential homes receive medical care through the usual facilities of the health insurance agencies.

Residential Care - is provided in Homes which vary widely in character. Some emphasize educational programs, some remedial care, some have special facilities for certain types of children. The service at the residential home includes medical and dental care, psychology, social work, speech and physiotherapy programs. The homes are maintained either by the Ministry of Labor and Social Affairs or by public and private agencies. A small number of emotionally disturbed or mentally ill and retarded children and adults are in residential care under the auspices of the Ministry of Health.

Community Housing - has been initiated by AKIM, who built and operate successfully hostels and apartments in various regions of the country. The Irene Gaster Home, initiated by Magen, the Shield, a group of volunteers, demonstrated that even adults with severe handicaps could live and develop sucessfully in a group home in the community. It is now under AKIM-Jerusalem.

Financial Assistance - The local authorities and the Ministry of Labor and Social Affairs maintain the children and adults in the Residential Homes, with a small and progressive contribution of the parents until the child becomes 18 years of age. A Central Parents' Committee operates on behalf of the Residential Homes in close cooperation with the management of the Services for the Retarded.

Recreation - Every year AKIM organizes central and local summer camps for thousands of campers both children and adults. Many other thousands participate throughout the year in leisure time program, museum education, theater, concerts and sports activities.

Research - Research programs are being carried out in genetics, endocrinology, special education, vocational and social habilitation and other areas.

Guardianship - Since 1980 the AKIM Guardianship Association has supplied guardianship services to people who lacked them.

Personnel Training - The Institute for Training of Social Education Workers has provided a course for personnel working in homes for the retarded. The Service for the Retarded of the Ministry of Labor and Social Affairs arranges regular in-service programs and study-days for personnel in this field. Most Teacher Colleges offer various programs in special education and mental retardation.

The Center of Rehabilitation and Human Development at Haifa University is promoting research, training and service programs in many areas of mental retardation and has sponsored many workshops, both national and international. Programs are also offered in the universities of Bar-Ilan (Ramat-Gan), Tel-Aviv, Ben-Gurion (Beer-Sheva) and the Paul Baerwald School of Social Work, Hebrew University (Jerusalem).

OTHER INFORMATION FOR VISITORS

Information as well as observation programs for professional and other visitors from abroad are arranged upon request by the Ministry of Labor and Social Affairs, Foreign Relations Division, Jerusalem, and by AKIM, Foreign Relations Department, Tel-Aviv.

School Holidays - In addition to the usual school holiday period of July and August, the two religious holiday periods in spring and in autumn are not recommended for intensive study or observation visits.

ITALY

Italy is a democratic Republic in the South of Europe with a population of 55 million (average annual growth rate 0.1%). The country is not rich in natural resources but has become highly industrialized. As in many countries there are regional economic and social differences between North and South, and continuing migration from rural to urban areas. There are still significant regional differences in the implementation of national legislation.

The Italian State decentralized much of its politico-administrative system in the decades following World War II, giving the 20 Regions administrative as well as certain legislative functions. In 1972, for example, the Regions were authorized to take over responsibility for public welfare, health and hospitals, vocational training and school support, excepting that curriculum matters, teaching methods and annual planning have remained with the Ministry of Education and the local school authorities (Provveditorati agli studi).

Italy differs from many other countries by strong national legislation which reflects what might be called a popular mandate against any kind of segregation. Law No. 118 of 1971 not only assures compulsory education of all handicapped children in regular schools but also provides for financial support and needed services to all persons with disabilities.

In 1978, a national health service was created which includes the specialized services needed by persons with disabilities, provided through the local health agency Unità Sanitaria Locale, serving areas with populations of 50,000 to 200,000.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministero della Pubblica Istruzione Direzione Generale Istruzione Elementare Viale di Trastevere, Roma 00153	Ministry of Education Elementary Education Department
Servizio Scuola Materna Viale di Trastevere, Roma 00153	Kindergarten Service
Ufficio Studi e Programmazione Ufficio Speciale per il Coordinamento delle attivià degli alunni handicappati Via M. Carcani, Roma 00153	Office for Studies and Programming Special Office for the Coordination of Activities of Handicapped Pupils
Ministero della Sanità Direzione Generale dei Servizi di Medicina Sociale Viale dell'Industria, Roma - EUR	Ministry of Health Department for Social Medicine

Ministero del Lavoro e della Providenza Sociale	Ministry of Labor and Social Welfare
Direzione Generale del collocamento della manod'opera Via Flavia 6, Roma	(work placement responsibilities)
Ministero per gli Affari Speciali Piazza Poli, Roma 00187	Ministry for Special Affairs
Ministero per l'Interno Direzione generale Servizi civili Piazza Quirinale, Roma	Ministry for Internal Affairs, Civil Service Department

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation

(ANFFAS) Associazione Nazionale Famiglie di Fanciulli e Adulti Subnormali Via E. Gianturco 1, Roma 00196	National Association of Families of Retarded Children and Adults

ANFFAS had its beginning in Rome in 1958 and has over 100 branches throughout the country with 12,000 members. The Association was the first in Italy to promote the interest of parents for a common action. In some Regions ANFFAS branches have adapted their policies to the new politico-administrative situation of the countries and their training centers have been transferred to local authorities. ANFFAS is a founding member of the International League of Societies for Persons with Mental Handicap.

Others which include mental retardation

SIAME (Societa Italiana per l'Assistenza medico-psico-pedagogica ai Minorati dell'Età Evolutiva)	Italian Association for Medical-Psycho-Educational Assistance to Children
Associazione Italiana per l'Assistenza agli Spastici (AIAS) Via Cipro 4, Roma	Italian Spastics Society (Member of Rehabilitation International)
Sezione di Neuropsichiatria Infantile della Societa Italiana di Psichiatria Via di Sabelli 108, Roma	Section on Neuropsychiatry of the Child Italian Psychiatric Society
Lega Italiana di Igiene e Profilassi Mentale c/o Clinica Psichiatrica Universitaria, Roma	Italian League for Mental Health
Unione Italiana per la Promozione dei Diritti del Minore Via Artisti, 34 Torino	Italian Association for Protection of Rights of Minors

Associazione Nazionale per l'Assistenza
ai figli Minorati (ANAFIM)
Via Carlo Pascal 6, Roma 00167

National Association for Child
Welfare
(Member ILSMH since 1984)

Associazione Italiana per la
Riabilitazione dei Minorati
Via Capecelatro, 66 Milano

Italian Association for
Rehabilitation of the Disabled

Pontificia Opera di Assistenza
Roma

Vatican Welfare Services

RESEARCH

Research in the field of mental retardation is carried out in Universities and especially within the Institutes of Neuro-psychiatry and Psychology of Children, but there is no research institute with a major interest in mental retardation. However, research in metabolic and chromosomal abnormalities receives attention, leading to greater interest in prevention and early detection. In some Regions of Italy, surveys have been carried out to assess the problem of disability and school integration and obtain data needed to evaluate existing services. The Center for Educational Research and Innovation (CERI) of the Organization for Economic Cooperation and Development (OECD) in Paris, has published research dealing with integration that includes Italian studies.

Istituto di Neuropsichiatria Infantil
University of Rome

Istituto "Romagnolà" per ciechi
Via Gregorio VII 267, 00165 Rome

Centro Studi Ministero della Sanità
Viale dell' Industria, Roma - EUR

PUBLICATIONS

Neuropsichiatria Infantile	Neurapsychiatry of the Child
Partecipazione	Participation
Annali della Sanita Pubblica	Public Health Annals
Diritti dell'Invalido Civile	Rights of Civilian Disabled Persons
Esperienze di Rieducazione	Re-education Experiences
Prospettive Sociali e Sanitarie	Social and Health Prospectives
Rivista IAS	Italian Spastics Society Riview
ANFFAS FAMIGLIE	ANFFAS Family Journal

BRIEF NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, clinical services and consultation to parents are available through the local health center, Unità Sanitaria Locale (USL), established by Law 833 of 1978 which changed the structure of health and related services nationwide. The centers' functions include basic social and rehabilitation services such as are needed by persons with disabilities including mental retardation.

Identification is often made by teachers at preschool and primary level. Assessments are carried out by pediatricians or multidisciplinary teams leading to certification of the child as a basis for getting special help.

Education - Policy in special education has changed dramatically from the segregation or even exclusion of handicapped children to the establishment by law of this right to education, first in ordinary schools (1971) and then in ordinary classes (1977). Since the 1987 decision of the Constitutional Court, integration of disabled children into the high schools (Lyceum, etc) is also obligatory. Parents at all times have the legal right to be consulted on their child's program.

With the increase of school integration, the number of special schools and residential institutions has dropped markedly, the clinical staff frequently becoming school consultants with the local or regional health authority's multidisciplinary support team. There are useful provisions for teachers who accept a child with disability: reduction in class size, ancillary helpers, support teachers, and regular support and consultation from the clinical team.

Work training and employment - Under the new Italian legislation segregation is also outlawed in the field of work. Efforts to integrate persons with significant degrees of mental retardation into the labor market are still in the beginning stages. It is important to note that the unions as a matter of principle agree with the policy of integration. However, as yet only a few school systems have developed vocational training which would prepare young people with mental handicap for work placement.

Medical care - Historically mental retardation was seen as within the province of psychiatry. Following enactment of Law 180 (1978) health care for persons with mental retardation and other disabilities became the responsibility of the local health centers, whose multidisciplinary staff is better prepared to carry out a comprehensive program.

Residential care - The large state institutions for the mentally ill also served for the confinement of adults with mental retardation. They have now been closed, but a certain number of smaller, private residential institutions is still available to parents who desire this type of care.

Recreation - Some recreation programs in cooperation with voluntary youth groups exist in various cities. These are spontaneous initiatives which are not part of a general and organized movement. There are some camping programs where retarded children and young adults are accepted, and several special holiday arrangements made by ANFFAS branches. Some summer programs are organized by public and religious agencies or by large commercial enterprises for the handicapped children of their employees, but increasingly participation in neighborhood activities will become more usual for children and adults.

Financial assistance - Law No. 118 (1971) concerning all categories of handicapped persons includes retarded citizens in the category of civilian disabled persons, assigning them a monthly disability pension (for persons without property), medical assistance to be paid by the Ministry of Health, and the payment of fees to private institutions for rehabilitation purposes on the basis of a special agreement with the Ministry of Health.

OTHER INFORMATION FOR VISITORS

Visitors can apply to:

ANFFAS, Via E. Granturco, 1 Roma

AAI (Amministrazione per la Attivita Assistenziali Italiane e
Internazionali), Via Giovanni Lanza, 194, Roma

SIAME, Piazza Lovatelli, 36, Roma

School holidays - December 23 to January 6; the months of July, August, and September.

IVORY COAST
(Côte d' Ivoire)

The Republic of Ivory Coast has been led since independence in 1960 by President Felix Houphouet-Boigny. Close ties are maintained with France, and French remains the official language. Population is estimated at 10 million. In 1983 Yamoussoukro became the nominal capital city, succeeding Abidjan, the largest city, which has a metropolitan population of over a million persons. Local government is carried out through 24 "departements." Although great differences exist between the very rich and the very poor, the country is considered one of the more stable and prosperous of the tropical African nations.

GOVERNMENT AGENCIES

Ministre de la Santé Publique et de la Population Abidjan	Ministry of Public Health and Population

Mental retardation is considered a part of the problem of mental health and thus comes under the responsibility of the health ministry. There is as yet no official agency charged specifically with the questions of intellectual disability.

VOLUNTARY ORGANIZATIONS

Association Ivoirienne des Parents d'Enfants Handicapés Psychiques - AIPEHP BP 1334 Abidjan 01	The Ivory Coast Association of Parents of Mentally Handicapped Children

Established in 1969, the AIPEHP maintains the only special school which so far exists for mentally handicapped children. The Association has close links with the French national parents' association, UNAPEI, and became a member of the International League of Societies for Persons with Mental Handicap in 1986, as well as an active member of Network Africa.

L'Arche de Bouaké
BP 373
04 Bouaké

Member of the International Federation of L'Arche which enables handicapped and non-handicapped people to live together in communities.

PUBLICATIONS

The Revue Handicap of the AIPEHP suspended publication temporarily in 1987 but is to be resumed as soon as financial means are available.

BRIEF PROGRAM NOTES

Education - The Institut Médico-Pédagogique (IMP) was opened by the Association of Parents in 1972, and is at present the main activity supported by the organization. It is situated on the periphery of Abidjan, in the town of Vridi. It is a day school with an enrollment for 1986/87 of 34, 18 girls and 16 boys, between the ages of 6 and 18. In addition to academic and prevocational classes, the program emphasizes psycho-motor activities, speech training and occupational therapy in the morning, with social and manual training activities in the afternoon on age appropriate levels, e.g. the older children learn sewing, cooking, gardening, raising chickens and rabbits. Transportation between school and home is provided by a bus which was a gift of Rotary International some years ago, now in need of replacement.

Before admission the children are examined and tested by a physician and his team, through the Center for Child Guidance, an official agency of the Ministry of Public Health. The IMP of Vridi has at its disposal an educational team of 15 persons, with a neuropsychiatrist responsible for the medical/pedagogical work and a directrice who is a social worker, and administratively responsible.

Future Plans - Immediate goals are to create one or two new sections of the Association in other areas of the country, and secondly, to plan and realize a project, possibly an agro-pastoral training center, to employ ex-pupils of the IMP.

Longer range goals are many, among them steps toward meeting the education needs of the more than 3,000 estimated retarded children in Abidjan, and in other parts of the country. The necessity of specific legislation is recognized in order to protect the rights of mentally handicapped people. A nation wide information campaign is planned as well as ongoing contacts with other countries, through Network Africa as well as through the ILSMH.

OTHER INFORMATION FOR VISITORS

Contact (preferably in French) the AIPEHP, BP 1334, 01 Abidjan.

School Holidays - The Institut Médico-Pédagogique of Vridi has no classes from 15 July until 1 October, but visits could be arranged if desired.

JAMAICA

Jamaica is the third largest island in the Caribbean, with a multiracial population of two and a half million, 50% under 20 years of age. Two-thirds of the population live in rural areas. Rapid population growth, overcrowded cities, an overburdened educational system, unemployment and underemployment are pressing problems.

There is high regard for education; the literacy rate is approximately 70% and there is an active literacy program. The University of the West Indies has campuses in Jamaica, Barbados and Trinidad.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education
National Heroes Circle
Kingston

Ministry of Social Security
National Heroes Circle, Kingston

Jamaica Council for the Handicapped
92 Hanover Street, Kingston

Ministry of Health and Environmental Control
Caledonia Avenue, Kingston

Ministry of Youth and Community Development
Kingston Mall, Kingston

Child Care and Protection Division
22c Old Hope Road, Kingston 5

Ministry of Local Government
Headquarters House
Duke Street, Kingston

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

Jamaica Association for Mentally Handicapped Children (JAMHC)
P.O. Box 224, Golding Avenue, Kingston 7

The Jamaica Association was founded in 1956 by a parent, Mr. Randolph Lopez, and is the only agency providing services solely for mentally retarded persons. There are local branches in 8 of the 13 parishes.

Other Voluntary Organizations which Include Mental Retardation

The St. Catherine Parents Association for Handicapped Children
9 Barret Street
Spanish Town

PVO Ltd. - a consortium of voluntary organizations including the JAMHC
P.O. Box 178
Kingston 5

Caribbean Institute on Mental Retardation
and Developmental Disabilities - CIMR
9 Courtney St.
Kingston

(See Caribbean Association on Mental Retardation and Other Developmental Disabilities - CAMRODD in Section on International [Regional] Organizations, Part I)

Since January 1976 when it was founded by CAMR (now CAMRODD), aided by funding from the Canadian International Development Agency, the Caribbean Institute has functioned as the technical professional arm of the Caribbean Association which represents voluntary agencies of the region. The main functions of the Institute are consultations, exchanges of information and dissemination of information, stimulation of services and training, and promotion of research. The Institute now consist only of a voluntary director, but works in close affiliation with the Path (Partners in Appropriate Technology for Handicapped) Resource Center, c/o Jamaica/West New York Partners of the Americas, 2A Ruthven Road, Kingston 10 .

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - A service is operated by the JAMHC, headed by a person trained in education and psychology, and there is a small team of persons on a part-time basis to whom referrals can be made. Very little use is made of psychiatric and psychological services since these are very scarce and are not usually available to the mentally retarded. In recent years a prescriptive approach has been taken and very little formal psychological assessment is performed.

In 1981, under a technical assistance agreement with the Netherlands Government, the Mico College Childrens Assessment and Research in Education (CARE) Centre was established at 5 Manhattan Road, Kingston 5, under the Ministry of Education. This centre assesses and evaluates children aged 4-14 with multiple disabilities and provides educational prescriptions.

Education - The JAMHC has expanded its program in the last decade from the School of Hope which has 70 children, to over 1000 special education places throughout the Island. These consist of segregated schools in five different towns as well as a large number of "Unit Classes" in regular schools. These come under the administrative control of the school board of the School of Hope and the senior person in charge is the Principal of the School of Hope. A wide range of types and degrees of severity of mental retardation are served by this program. The Association undertook this program of expansion by establishing branches and local societies in the different parishes on the Island. Each of these has responsibility for establishing special classes or schools in that area. This program has the backing of the Ministry of Education which, since 1975, has underwritten the cost of special education by giving substantial grants to the various voluntary agencies providing special education services including children who are retarded. A 5-year development plan for special education was formulated in 1978.

An early stimulation project,begun under the auspices of the Jamaica Council for the Handicapped,serves between 180-200 retarded and other handicapped children in Kingston and the surrounding areas. In 1977, the project was adopted by the Ministry of Social Security and is financed by Government. A mobile unit providing assessment, educational placement and parent training is provided by PVO Ltd. for all disabilities age 0-15 years. Much of the expansion of these projects has been facilitated by government programs of Special Employment and National Youth Service.

Work training and employment - The Ministry of Social Security, through its agency, the Jamaica Council for the Handicapped, began a vocational rehabilitation program for all handicapped persons in 1974. It comprises an Assessment and Guidance Center for 50 persons and 4 production workshops with a total client population of approximately 60. A pre-vocational unit is operated also by the School of Hope.

Medical care - is provided within the regular health service.

Residential care - is quite inadequate. Care for approximately 200-300 children is provided by government agencies; the Lopez Home operated by the JAMHC serves 55 moderately and severely retarded children. The Ministry of Health provides a residential unit for 30-40 severely retarded and disturbed children at Bellevue (mental) Hospital. The Ministry of Local Government provides residential service to approximately 65 severely mentally and physically handicapped children at the Eventide Home. The Ministry of Youth, through its Child Care and Protection Division, also provides residential care for some handicapped children who are abandoned and taken into care by the Government.

Financial assistance - The JAMHC and the Jamaica Council for the Handicapped run the major programs for the retarded in Jamaica. Although the Ministry of Education substantially underwrites the cost of the educational program, the other activities of the Association have to be supported by fund raising. Some children living in the Lopez Home are partially subsidized by the Child Care Division; others are paid for by their parents, but in both instances this is inadequate for their full support. Fund raising is therefore a fundamental part of the Association's activities.

Community Based Rehabilitation - A comprehensive programme designed to provide home training, educational placement in integrated school settings, vocational placement and the development of income generation for disabled persons and their families has been established in 1985 by the St. Catherine Parents Association, a parent advocacy group with 4 branches. Each branch employs community workers who provide home based services for a total of approximately 300 persons from birth to 25 years at present.

Recreation - Most of the projects and programs for retarded children have organized leisure time activities but these are not adequate to meet the need. Various organizations or interested young people assist in these programs.

Research - Small research projects have been carried out by graduate and undergraduate students at the University of the West Indies. These have been coordinated most often by the Jamaica Association or by the Caribbean Institute on Mental Retardation. Research into causes, evaluation of programs, prevalence of developmental disabilities and attitudes of parents and public has been conducted.

Personnel Training - With a grant from the Netherlands Government, a teacher training program was begun in 1976 at Mico Teacher Training College. Most of the teachers in the special education program are ordinary trained teachers, graduates of teacher training colleges in Jamaica. Some of the staff are Peace Corps volunteers who have training in special education, and there are a few Jamaicans who have received special education training overseas. A large number of short-term in-service courses in special education have been held both by the Caribbean Institute and by the Principal of the School of Hope in conjunction with the Partners of the Americas.

Planning - has been undertaken in a number of areas during the past 10 years. Special education: a Caribbean regional workshop on planning special education services was held in 1976 and out of this work a 5-year development plan for special education in Jamaica was undertaken. Residential services: a workshop on planning residential services was undertaken and a report, "Guidelines for Residential Services for Handicapped Persons," was issued in 1977. A 5-year plan for the development of a vocational rehabilitation program was prepared with assistance of an ILO advisor. Planning and consideration is being given to the role of government and the voluntary agencies in the future development of services for the handicapped.

OTHER INFORMATION FOR VISITORS

Information and assistance in planning visits may be requested from the following:

Jamaica Association for Mentally Handicapped Children
Jamaica Council for the Handicapped
Caribbean Institute on Mental Retardation and Developmental Disabilities

School Holidays - Mid-July through the first week of September; usually 2-1/2 weeks for Easter and 3 weeks for Christmas.

J A P A N

Japan's population of 121 million is concentrated around the large cities; 12 million people live in the Tokyo metropolitan area. The economy is characterized by intensive industrialization and urbanization; the people have the highest standard of living in Asia. Japan's policy of controlled population growth plus high sanitary and health standards have resulted in a life expectancy rate of 80 years. Compulsory education consists of 6 years of elementary and 3 years of secondary school; the literacy rate is 97%. Social welfare was traditionally the responsibility of the family, employers or private organizations, but government is now providing a broad range of assistance programs through health insurance, pensions, minimum wage laws, and the operation or subsidizing of a variety of categorical services.

The first specialized institution for retarded children was started in 1891. Their care and education was primarily in the hands of philanthropic pioneers until the enactment of a series of laws which gave legal basis for development of services: 1947/laws on child welfare and education, 1950/mental health, 1960/welfare of mentally deficient persons (over 18 years). Voluntary associations and the pressure of public opinion have played a strong role in bringing about these legislative changes. Services are, with some exceptions, provided through the 47 Prefectures (government units).

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministry of Health and Welfare 1-2-2, Kasumigaseki, Chiyoda-ku, Tokyo 100	Koseisho
Bureau of Children and Homes	Jido-Katei Kyoku
Section of Welfare for Handicapped Children (including MR adults)	Shogai Fukoshi Ka
Section for Child and Maternal Health	Boshi Eisei Ka
Bureau of Health and Medical Care	Hoken Iryo Kyoku
Mental Health Section	Seishin Hoken Ka
Ministry of Education 3-2-2, Kasumigaseki, Chiyoda-ku, Tokyo 100	Mombusho
Bureau of Primary and Secondary Education	Shoto-Chuto Kyoiku Kyoku
Ministry of Labor 1-2-2, Kasumigaseki, Chiyoda-ku, Tokyo 100	Rodosho
Disabled Persons' Employment Division	Shogaisha Koyo Taisakushitsu

Prefectural agencies — Services are provided through the Children's Section, or Mother and Child Section as well as through Child Guidance Centers and Consultation Centers for mentally retarded persons in each Prefecture.

National planning — the Council for Countermeasures for Mentally and Physically Handicapped Persons is a 15-member committee representing education, institutions and laws, appointed by the Ministers of Health and Welfare and of Education, with the objective to coordinate all related activities. There are also 47 prefectural committees with the same objective.

VOLUNTARY ORGANIZATIONS WITH PRIMARY CONCERN IN MENTAL RETARDATION

Professional

Japan Association for the Scientific
Study of Mental Deficiency (JASSMD)
8F, Zenkoku Tobacco Center Bldg.,
2-16-1, Nishishimbashi, Minato-Ku,
Tokyo 105

Nihon Seishin Hakujaku
Kenkyu Kyokai
Founded in 1965
Member IASSMD

Japan Association for the Care and
Training of the Mentally Retarded
7F, Zenkoku Tabacco Center Bldg.,
2-16-1, Nishishimbashi, Minato-ku,
Tokyo 105

Nihon Seishin Hakujakusha
Aigo Kyokai
Founded in 1934
Affiliate member ILSMH

Japan Association of Teachers for
the Mentally Retarded
8F, Zenkoku Tabacco Center Bldg.,
2-16-1, Nishishimbashi, Minato-ku,
Tokyo 105

Zen Nippon Tokushu Kyoiku
Kenkyu Renmei
Founded in 1952

Citizen

Japan Parents' Association for the
Mentally Retarded
8F, Zenkoku Tabacco Center Bldg.,
2-16-1, Nishishimbashi, Minato-ku,
Tokyo 105

Zen Nippon Seishin
Hakujakasha Ikuseikai
Founded in 1952
National Member ILSMH

Coordinating body

In 1974 these four associations formed a coordinating body which is also active internationally, e.g. as a national member of the Asian Federation for the Mentally retarded, and in promoting training and exchange of personnel with other countries:

Japan League for the Mentally Retarded
(JLMR)
8F, Zenkoku Tabacco Center Bldg.,
2-16-1, Nishishimbashi, Minato-ku,
Tokyo 105

Nihon Seishin Hakujakusha
Fukushi Renmei
Founded in 1974

Other Organizations which Include Mental Retardation

The National Association for
Employment of the Handicapped
8F, Toso-Toranomon Bldg.,
1-9-2, Toranomon, Minato-ku, Tokyo, 105

Shintai Shogaisha Koyo Sokushin
Kyokai
Founded in 1975

Japanese Association for Physically
Handicapped Children
3-13-5, Higashi Ikebukuro,
Toshima-ku, Tokyo 170

Nihon Shitai Fujiyuji Kyokai

National Association to Care for the
Profoundly Handicapped
2-30-9, Mishuku, Setagaya-ku,
Tokyo 154

Zenkoku Jusho Shinshin Shogaiji(sha)
wo Mamoru Kai

Railway Welfare Association
Social Welfare Division
5-1, Kojimachi, Chiyoda-ku,
Tokyo 102

Tetsudo Kosai Kai has many services, including instituions for retarded people.

RESEARCH

Mental Deficiency Research Section
National Institute of Mental Health
(Ministry of Health and Welfare)
1-7-3-, Konodai, Ichikawa, Chiba 272

Section of Human Genetics
National Institute of Genetics
(Ministry of Health and Welfare)
1-111, Yada, Mishima, Shizuoka 411

National Center for Nerves,
Mental and Muscular Disorders
2620, Ogawahigashi-machi,
Kodaira, Tokyo 187

Tokyo Metropolitan Institute
for Neuron Sciences
Musashidai, Fuchu, Tokyo 183

National Institute of Special
Education (Ministry of Education)
2360, Nobi, Yokusuka, Kanagawa 239

Research Institute of Special
Education
Tokyo Gakugei University
4-1-1, Nukuikita-machi,
Kodaira, Tokyo 187

Institute for Developmental Research
Aichi Prefectural Colony
Kamiya-cho, Kasugai, Aichi 480-03

Tokyo Metropolitan Rehabilitation
Institute for Physically and
Mentally Handicapped
3-17-2 Toyama, Shinju-ku-ku
Tokyo 160

In addition there are specific research groups on congenital anomalies, human genetics, child and adolescent psychiatry, pediatric psychiatry and neurology, and special education, also concerned with mental retardation.

PUBLICATIONS

Japanese Journal on Developmental Disabilities
Quarterly: Official organ of JASSMD

Japanese Journal of Child and Adolescent Psychiatry
Quarterly: Official organ of the Japanese Association of Child and Adolescent Psychiatry (with English abstracts)

Psychiatria et Neurologia Paediatrica Japonica
Quarterly: edited by Shoni Seishin Shinkei Gaku Kenkyu Kai

Japanese Journal of Special Education
Three issues annually: Official organ of the Japanese Association of Special Education (with English abstracts)

Hattatsu no Okure to Kyoiku
Monthly: edited by the Japanese Association of Teachers for the Mentally Retarded

Aigo
Monthly: edited and published by the Japanese Association for Care and Training of the Mentally Retarded

Te o Tsunagu Oya Tachi (Parents Hand-in-Hand)
Monthly: Official organ of the Japanese Parents' Association for the Mentally Retarded

Seishin Hakujakusha Mondai Hakusho (White Paper on the Problems of the Mentally Retarded
Annual: edited by Japan League for the Mentally Retarded

BRIEF DESCRIPTIVE NOTES O PROGRAM AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents - Child Guidance Centers in each Prefecture are legally responsible for such programs for retarded children under 18 years of age. For those who are older, Mentally Retarded Persons Consultation Centers in each Prefecture are responsible. Many university hospitals, general hospitals and psychology or education departments of universities also offer these services on a voluntary basis, and specialized community clinics are growing in number. A 1961 amendment to the Child Welfare law provides for mandatory medical examination of all children at age 1:6 and 3, including an examination of mental development. Screening tests for PKU and five other inborn metabolic errors are applied to all new born infants. At age 6 children are examined and tested by school authorities.

Education - There are almost 21,000 special classes for ca. 105,000 retarded children in ordinary elementary and secondary schools, mainly for mildly retarded children with no physical or behavioral problems. For such children with difficulties in social adjustment, and for those diagnosed as moderately or severely retarded there are 450 special schools (kindergarten, elementary, secondary and high school) with 80,000 pupils. After 1979, special schooling became mandatory for all who want to go to school regardless of nature and degree of retardation. Pre-school education for retarded youngsters is now developing both in special facilities and in ordinary kindergarten or nursery schools. The integration principle is emphasized in those programs.

Work Training and Employment - Vocational training is carried on both in institutions and special schools or classes. Vocational training centers and sheltered workshops are operated under the Ministry of Health and Welfare through the local welfare system. Under the welfare system, there are also two programs promoting supported employment: "training for vocational adjustment program" in which the retarded person is entrusted to a business owner for training on the assumption that he will be employed there following completion of his training period, which is normally 6 months but can be extended to one year. The other program is the vocational guidance "parent system," which places the retarded person with a business manager or other private individual during a set period for personal guidance and skill training, thus promoting the handicapped person's employment and workplace stability leading to greater self-sufficiency. The Ministry of Labor is also concerned with employment promotion programs under the Physically Handicapped Person's Employment Promotion Law, since 1976 open also to mentally retarded persons.

Medical Care - Outside of institutions there are no specially organized services or programs of medical care for retarded people, but pediatricians and psychiatrists in hospital and private practice are now seeing many more than before.

Residential Care - There are more than 950 residential institutions for almost 67,000 mentally retarded persons. Traditionally, institutions have been of relatively small size with an average of 70 residents; more recently, prefectural governments have built larger, multi-functioned institutions for 300 to 800 residents. Almost one-third of all residential institutions for the retarded are public, and the remaining two-thirds are private. Two institutions are run by the national government: Chichibu Gakuen (Tokorozawa, Saitama 359) for children, and Nozomi-no-Sono (Takasaki, Gunma 370) for adults.

Financial Assistance - A special child rearing allowance is given to guardians caring for moderately or severely mentally or physically handicapped persons under the age of 20 in their homes. An additional grant is given when severely handicapped people (regardless of age) at home require special care on a daily basis. A handicapped person's welfare pension (non-contributory) is available to moderately or severely retarded persons of 20 years or older, depending on a family means test. Certain tax exemptions are provided for families with mentally retarded children, regardless of income.

Recreation - Programs so far have been developed largely by the parents' associations with support from voluntary community organizations. Summer camps exist where parents can stay with their retarded children.

Research - In addition to the national research institutions many universities and colleges are undertaking studies in the biological and behavioral aspects of mental retardation. The Japan Association for the Scientific Study of Mental Deficiency coordinates and sponsors informational exchange on research activities relating efforts in Japan to the international scene.

Personnel Training - More than 50 universities and colleges have courses in special education. A basic [illegible]-year course and a 2-year postgraduate course are prescribed for special education teachers. The only formal training program for personnel working in institutions is the Personnel Training School attached to the National Chichibu Gakuen.

Planning and Coordination on the national government level is primarily handled through a Central Council set up under the Fundamental Law for Countermeasures for Mental and Physically Handicapped Persons (1970). The Advisory Committees on Child Welfare, on Mental Health, and on the Welfare of Retarded Persons, all functioning under the Ministry of Health and Welfare, and related advisory committees under the Ministry of Education discuss legislation, standards, system of care, prevention, etc. and make recommendations to the ministers.

OTHER INFORMATION FOR VISITORS

Visitors from abroad are recommended to make contact with any one of the following agencies in advance:

Japan League for the Mentally Retarded
8F Zenkoku Tobacco Center Bldg.
2-16-1, Nishishimbashi, Minato-ku
Tokyo 105

Liaison Officer Minister's Secretariat
Ministry of Health and Welfare
1-2-1, Kasumigaseki, Chiyoda-ku, Tokyo 100

Planning and Coordination Division
Science and International Affairs Bureau
Ministry of Education
3-2-2, Kasumigaseki, Chiyoda-ku, Tokyo 100

School Holidays - Last two weeks of March; latter half of July and all of August; last week of December and first week of January.

JORDAN

The Hashemite Kingdom of Jordan, a constitutional monarchy in the Middle East, has a population of 3.7 million, with about half below the age of 15. The capital is Amman, Arabic is the official language and Islam the dominant religion. Education is free and compulsory for primary and secondary levels; the literacy rate is 75%. There are technical schools, schools of nursing, trades and agriculture, teacher training colleges and a university. The country depends a great deal on voluntary agencies for provision of social welfare services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Labor and Social Development
P.O. Box 8720
Amman

Provides 3 day centers for mild to moderately handicapped children, ages 6-14, and three vocational centers for persons between the ages of 14-45. These are located in Zarka, Irbid, Salt and Rusafieh.

Ministry of Health
Amman

The Fuheis Hospital for Psychiatric Illness has a department for mentally retarded adults aged 15 years and over.

VOLUNTARY ORGANIZATIONS

In 1988 a total of 20 service programs, mainly for children, were being provided by voluntary organizations. Among them are the following:

Young Women's Moslem Association (YWMA)
P.O. Box 19124, Amman

Its (day) Center for Special Education has pre-school, school and vocational training sections for mild to moderately retarded children ages 3-18. YWMA also provides recreational activities through a Youth Club, and work opportunities in its sheltered workshop. Member of ILSMH since 1978.

National Society for Mentally Handicapped (NSMH)
Center for Special Education and Rehabilitation
P.O. Box 925716, Amman

Two day centers provide education and training for children with moderate/severe handicap, ages 6-14. Member of ILSMH since 1980.

Mental Health Society (MHS)
P.O. Box 9048, Amman

Four schools for mild/moderately mentally handicapped students (ages 6-12, or 6-15), one of which is residential (Wadi Al Seer Center).

OXFAM/UNRWA Camp Centers - Oxfam, in cooperation with the United Nations Relief and Work Agency for Palestine Refugees and with various other local charitable organizations in Jordan, run four centers for disabled persons (ages 3-25) in the Jersh, Souf, Al Hussoun, and Baqaa refugee camps, following principles of Community Based Rehabilitation, i.e. using all possible available resources at hand, persons and materials.

There are also four private non-profit centers in Amman providing education and training mainly for school age children. Three are residential centers and accept children who are severely mentally handicapped.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Education and training: As evidenced above, the responsibility for providing services is primarily with the voluntary sector and reaches mainly children of school age. However, since the first efforts started in 1968, steady progress has been made.

Vocational training and employment: In most school centers there is emphasis on vocational training leading to expectation that the children will be able to participate later in adult life in the community. The YWMA sheltered workshop program (P.O. Box 78, Jordan Industrial Estates Corporation) provides job opportunities for 30 persons with mental handicap and finds suitable jobs in the local market for placement after training at school. The vocational centers under the Ministry of Social Development train persons (age 14-45) who are blind, deaf, physically and mentally handicapped. There are three centers, one for women and one for men in Rusafieh and one for boys and men in Irbid.

Personnel training: All Ministry of Labor and Social Development Services provide in-service training for their staff. There are two teacher training colleges which give special education training; the University of Jordan has a diploma course in special education. In-service training for voluntary organization personnel has been augmented by sending persons abroad for specialization and through in-service training programs by experts from abroad.

OTHER INFORMATION FOR VISITORS

Information may be requested from the Ministry of Labor and Social Development, the Young Women's Moslem Association or other voluntary organizations.

School holidays: June, July and August.

KENYA

Kenya, former British colony and protectorate became independent in 1963; it has a population of 20 million with about 50% under the age of 15 years. Despite a high population growth rate of 4% per annum the average life expectancy has improved to 57 years. Infant mortality for boys is 125 per 1000 and for girls 120 per 1000. The Government promotes family planning to bring down the high growth rate.

The educational system, originally supported by Christian churches is now fully supported by the government and private self-help effort. There are three government universities and three private university colleges plus specialized institutes catering for various disciplines. In 1978 a Special Education department was created within the Ministry of Education, Science and Technology. Its divisions are administration, inspectorate, curricula development and teacher training. In 1986 the Kenya Institute for Special Training became operational, and has taken over the training of teachers for children with special education needs.

In 1986, there were 26 schools for the hearing impaired, 45 schools and units for the mentally handicapped, 43 homes and units for the physically handicapped and 10 primary and secondary schools for the visually handicapped. In addition, there were 17 Vocational Training Centres for all the handicapped and 17 Special Education Assessment and Research Centres throughout the country.

GOVERNMENT AGENCIES WITH MENTAL HANDICAP RESPONSIBILITY

Ministry of Health

Director of Medical Services
P.O. Box 30016, Nairobi

College of Health Sciences
P.O. Box 30195, Nairobi

Kenyatta National Hospital
P.O.Box 20723, Nairobi

Mathare Hospital
P.O. Box 40633, Nairobi

Ministry of Education, Science & Technology

The Permanent Secretary
Special Education Section (Administration)
P.O. Box 55980, Nairobi

The Chief Inspector of Schools (Primary)
Special Education Section (Inspectorate)
P.O. Box 53846, Nairobi

Kenya Institute of Education
Special Education Section
P.O. Box 30231, Nairobi

Teacher Training Colleges with Special Education Programmes

High Ridge Teacher Training College
Mental Handicap Programme
P.O. Box 43005, Nairobi

Kenya Institute of Special Education
P.O. Box 39420, Nairobi

Ministry of Labour

Commissioner of Labour
Labour Department
P.O. Box 40326, Nairobi

Nairobi Industrial Vocational Training Centre
P.O. Box 40540, Nairobi

Ministry of Culture & Social Services

Commissioner of Social Services
Department of Social Services
P.O. Box 30276, Nairobi

Principal Rehabilitation Officer
P.O. Box 30276, Nairobi

VOLUNTARY ORGANIZATIONS

Primary Concern in Mental Retardation

The Kenya Society for the Mentally Handicapped
P.O. Box 42365, Nairobi

Founded in 1969, originally a parent group associated with the first special school (St. Nicholas/Jacaranda School) the Society now reaches out into many parts of the country, supporting new initiatives, in close cooperation with government efforts. Member of the International League of Societies for Person with Mental Handicap since 1972, it was host to the League's 8th World Congress in 1982; members of the Society have actively supported formation of NETWORK AFRICA which presently joins 16 countries. The Society supports the:

Kenya National Special Olympics
P.O. Box 42365, Nairobi and the

Kenya Federation of Gateway Clubs
P.O. Box 42365, Nairobi

Others

The Society of Parents and Friends of the Handicapped Children
P.O. Box 44516, Nairobi (for children with mental and physical handicaps)

Association for the Physically Disabled of Kenya
P.O. Box 46747, Nairobi

UNESCO Sub-Regional Project for Special Education
Eastern Africa
P.O. Box 30592, Nairobi

RESEARCH

As yet, little research has been done on mental retardation. There is some uncompleted research being carried out by the Scientific Committee of Kenya Society for the Mentally Handicapped on an "epidemiological survey to find out the prevalence of mental retardation and possible etiology". Other studies are being carried out by the University of Nairobi and Kenyatta University. The 17 Special Education Assessment and Research Centres are providing basic informational studies.

PUBLICATIONS

Apart from publications of UNESCO Africa Sub Region, there is only a published Masters Thesis by Mrs. Martha J. Menya entitled "Formal Educational Setting - How it Affects the Socialization of Educable Mental Retarded Children", University of Nairobi, April, 1980. The Kenya Medical Journal occasionally includes articles on disabilities.

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Diagnosis and Assessment Services - are carried out by 17 education assessment centres throughout the country. These are new and are in addition to the services given by the Children's Clinic of the Nairobi City Council and private practitioners. Parent counseling is carried out at home based programmes and by schools and units. Seminars for parents are organized by the branches of the Kenya Society for the Mentally Handicapped.

Education - While in 1978 fewer than 200 children with mental handicap were receiving special education services, in 1986 there exist 14 special schools, 28 units within ordinary primary schools and 3 community based programmes for children with mental handicap, with total enrollment of just under 2,000 children aged 6 to 18 years. There are five boarding schools but no permanent residential centres.

Work Training - The special schools have vocational training units with workshops for woodwork, handicrafts, metal work, sewing, toy making etc.; some schools have farms on which they raise livestock, as chicken and rabbits, and grow food crops. Employment opportunities for adults are limited.

OTHER INFORMATION FOR VISITORS

For further information contact the Special Education Section, Ministry of Education, or the Kenya Society for the Mentally Handicapped:

P.O. Box 42365
Nairobi (Visitor's address: Prudential Assurance Building,
Wabera Street
Nairobi
Tel. 33.62.44, Mr. A.O. Menya.

School Holiday - November to mid-January, Easter and the month of August.

KUWAIT

Kuwait, an Arab state under British protection, became fully independent in 1961. The population of over 1,600 million is primarily of Arab background and Islam is the official religion. The constitution puts executive power in the head of state, the Emir, a member of the Sabah dynasty founded in 1756; he appoints a Prime Minister who selects a cabinet. There is a 50 member national assembly elected by Kuwaiti men over 21 years age. The majority of the population are non-Kuwaitis and do not have a vote.

Oil is the country's economic mainstay; it provides a very high per capita income so that Kuwait has become one of the most advanced welfare states. All medical, social and educational services are provided free. Education is compulsory for the primary and intermediate levels; girls as well as boys are encouraged to go into higher education.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education

Department of Special Education

Department of Psychological Services

Ministry of Labour and Social Affairs

Department of Social Care

Ministry of Public Health

VOLUNTARY ORGANIZATIONS

Including Mental Retardation

Kuwait Society for the Handicapped
P.O. Box 6832, Hawalli, 32043
Kuwait

Founded in 1971 by public spirited citizens to assist the official agencies in providing services for severely handicapped children, the Society is a member of Rehabilitation International and (since 1975) the International League of Societies for Persons with Mental Handicap.

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Early Case Finding, Consultation to Parents, Diagnosis Assessment and Medical Care - The Social Psychological Services, Department of Ministry of Education, has a special bureau for diagnosis, referral and placement. Diagnosis and treatment in special cases is the responsibility of the Ministry of Health, which provides physio-therapy in the major hospitals and attends to the medical needs of pupils and residents in specialized centres, including genetic counselling. The Kuwait Society for the Handicapped, through its centre for severely multihandicapped children, publicizes its goals for the purpose of encouraging parents of such children to bring them for assessment, treatment, and parents counselling; parents of children in residential care are encouraged to take their children home for weekends and holidays.

Education, Work Training and Financial Assistance - Educational services are provided in the 11 schools for special education, which make up Kuwait's modern rehabilitation centre serving the blind, deaf, physically handicapped and mildly/moderately retarded. These services, provided by the Department of Special Education, are on a day basis with residential facilities available for pupils from distant places or outside Kuwait, as well as those with special problems. The total enrollment in 1984 was 2050 of whom 918 were mildly retarded.

The Kuwait Society for the Handicapped provides educational classes held by qualified teachers in special education for its residential children.

The Ministry of Labour and Social Affairs is responsible for vocational training at the institutes/schools, for employment placement assistance, and for financial assistance for persons so severely handicapped that employment in the open community is difficult.

Residential Care - The Ministry of Labour and Social Affairs is also responsible for services for moderately and severely retarded people, and in 1964 established a centre which at present accommodates 392 residents (children and adults). Another centre for multiply handicapped persons was founded in 1974. In both a close contact is maintained with families, including weekend and holiday visits.

The residential program of the Kuwait Society for the Handicapped serves about 144 severely physically and multiply handicapped children, and intends to expand to serve 200 children. There is extensive involvement of volunteers, including young people, in the services of the Society. The Society is planning to establish a day care centre for the severely/profoundly - mentally handicapped children for treatment, training, behavior modification, parent counselling and other relevant services.

OTHER INFORMATION FOR VISITORS

Information may be obtained from the Kuwait Society for the Handicapped.

LUXEMBOURG

The Grand Duchy of Luxembourg, bounded by Germany, Belgium and France, has an area of 999 sq. miles and a population of 360,000 people. Education is free and compulsory for 6 to 15 years old; the State supported secondary and technical schools are free of charge. Besides various institutes of higher education, there is an International University of Comparative Sciences.

The Ministry of Labor and Social Security and the National Labor Office contribute to the various pensions for employed persons and their families which include medical benefits; public health standards are high and patient costs low, due to government support. Family allowances are also provided for all 5-year residents with children, under the Family Allowances Fund; under this same Fund the government pays the entire costs of birth grants and supplementary allowances for handicapped persons of any age.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministère de l'Education Nationale
Service de l'Education Diffèrenciée
6, Boulevard Royal
Luxembourg 2449

Ministry of National Education

VOLUNTARY ORGANIZATIONS

Ligue Luxembourgeoise pour le Secours aux
Enfants, aux Adolescents et aux Adultes
Mentalement ou Cèrébralement Handicapès
3, Avenue Monterey
2163 Luxembourg

Luxembourg League for the Aid
of Mentally Handicapped
Children, Adolescents and
Adults "Ligue HMC"
Founded in 1963.

Association des Parents d'Enfants
Mentalement Handicápés
Centre Nossbierg, B.P. 331
4004 Esch-sur-Alzette

Association of Parents of
Mentally Handicapped
Children "APEMH"
Founded in 1967.

Both are members of the International League of Societies for Persons with Mental Handicap, The Ligue HMC since 1964, APEMH since 1982.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Mentally retarded children fall under the same compulsory education laws as normal children, and are educated in special classes in regular schools, in special private boarding schools, or in regular classrooms when access to special education is limited; the government pays for each of these placements.

The Association of parents in Esch-sur-Alzette runs a hostel for adults, "Foyer de la Solidarite" and other services including an active youth group; its vacation homes are open to families from other countries.

New initiatives have been taken in the early eighties by the Ligue H.M.C.. Thus, in 1980, a centre for young men with mild mental handicap was opened in Luxembourg City; it houses six to eight people with a difficult social background who go out to work in the morning and come back after work. In 1981, the international year of handicapped people, an international group of artists, undertook creative activities with the mentally handicapped population of the Rehabilitation Centre at Capellen; the experience was very positive and has found a sequence in a creativity project financed by the European Community. In 1982, a Centre for Aid through Work was opened at the Rehabilitation Centre of Capellen; it is destined to help people with a very severe mental handicap. Starting in 1984, a new evaluation scheme has been running at the Rehabilitation Centre; on the basis of a 70-day observation and practical training a description is established for each candidate with suggestions for the best possible use of their qualities. In 1986, the Ligue HMC brought to a conclusion the operations necessary for launching a fruit cooperative; it also bought a house where a group of six to eight mentally handicapped people who have no family background, will live when not at work at the Rehabilitation Centre.

OTHER INFORMATION FOR VISITORS

Information may be obtained from the Ligue Luxembourgeoise pour le Secours aux Enfants, aux Adolescents et aux Adultes Mentalement ou Cèrébralement Handicapés

Ligue H.M.C.
8, Avenue Monterey
2163 Luxembourg

School Holidays - July and August

MACAO

Macao is a Portuguese administered enclave about 40 miles southwest of Hong Kong in south China. It consists of a peninsula and the two islands of Taipa and Coloane. Population estimates vary between 400,000 and 450,000 people. Macao is a melting pot of Chinese (about 96 percent) Portuguese (2 percent) and mixed Chinese-Portuguese called Macanese (2 percent). Macanese hold almost 90 percent of government jobs (because of their language abilities), Portuguese generally have professional positions and Chinese make up the commercial, industrial and labor sectors. In 1976, Portugal granted broad autonomy and it is expected that the territory will become officially part of mainland China before the end of the century.

Macao was settled by the Portuguese in the early part of the 16th century and for 300 years was the sole point of entry into China. The ebb and flow of history brought various influences upon Macao's culture; the Dutch, British, Japanese, French, Americans and Russians "touched" Macao in many ways over the years.

Social services are limited in number, many are conducted by voluntary and religious organizations and are generally subsidized by the government. Staff members are often overworked and underpaid. Nevertheless, concrete steps are being taken on the part of government and the voluntary organizations to improve the situation; questions of long range planning and lack of funding contribute to slow progress.

It is estimated that between 600 to 625 people are being cared for at present out of possibly 30,000 who may be regarded as mentally handicapped.

RESPONSIBLE GOVERNMENT AGENCIES

Direcção dos Servicos de Saude	Ministry of Health
Direcção dos Servicos de Educação e Cultura	Ministry of Education and Culture

VOLUNTARY ORGANIZATIONS

Catholic Diocese of Macao - Responsible for the following residential institutions for mentally retarded persons:

Lar de Caridade Estrada do João Paulino, 22 Penha, Macao	Serves 40, mostly young boys and girls. Receives government subsidy plus support for an educator and a social worker assistant.
Centro de San Luis Macao	Serves 150 boys and men. Has a sheltered workshop. Receives government subsidy.
Centro de Santa Lucia Vila de Nossa Senhora Coloane (Ka Ho)	For 65 girls and women. Receives government subsidy.

Centro de Santa Margarita Coloane	For 27 girls and women. Receives government subsidy.

The Ministry of Health administers and provides total funding for the Pavilhão Cronicos da Taipa which serves 107 persons, children and adults, men and women.

Efforts are underway to bring the programs of all these institutions to a more humane level.

Special Classes in Education - The Escola Primaria Oficial Pedro Nolasco da Silva in Macao, under the Ministry of Education and Culture, has a number of special classes for mentally retarded children, some of whom have been integrated into ordinary classes. There are also special "pedagogic classes" which provide special sessions for slow pupils, including those who have been integrated in regular classrooms in schools throughout Macao. Some 120 children are so far involved.

Caritas (The Catholic Charities Services) under the direction of the Catholic Diocese of Macao, is reaching out to offer home care for children who are mentally handicapped. At least 100 families of children and adults are being helped through home visiting programs. These services are provided through the Institute of Social Services in Macao which trains both men and women and is accredited by the local university. Director is Mother Mary (Conossian Sister), under the Catholic Diocese of Macao. 15 students per class.

Personnel and Parent Training - INTERAID, Inc., a non-governmental international agency based in the United States and Hong Kong (100 Tsui Ping Road, Kwun Tong, Kowloon, Hong Kong) has as one of its projects and expertise, care for persons with mental handicap and training for care-personnel. It has conducted training programs of one-week duration in Macao at the request of the Government and private groups for about 140 people, many of whom are involved in working with the mentally handicapped in Macao's institutions, schools and in private home care. Public school teachers and students of the Institute of Social Services (as well as parents) have also completed one-week courses given by this agency. Such courses are aimed at a non-institutional, non-professional and low-cost approach to caring for mentally handicapped persons. It proposes to make the trainees into future trainers of others. INTERAID is also conducting a private survey (some 4,000 interviews) in Macao to determine prevalence and attitudinal factors concerning persons with mental handicap.

OTHER INFORMATION FOR VISITORS

Request information from the Ministry of Health, Ministry of Education, or the Catholic Diocese, depending or specific interest of the visitor.

School Holidays - Mid-July through August, Chinese New Year, Christmas and Easter.

MALTA

The Island of Malta, because of her position in the center of the Mediterranean, her deep natural harbors, healthy mild climate and close proximity to both Europe and North Africa, attracted many powerful nations to her shores from the earliest times. The Phoenicians, the Carthagenians, the Romans, the Arabs, the Normans, the Angevins, the Aragonese and the Castilians, the famous Order of St. John of Jerusalem, the French, and finally the British — all in their turn ruled over the country up to as recently as 1964 when Malta became an independent State within the British Commonwealth of Nations. Malta has been a Republic since December 1974.

The civilizations of more recent times have all left their mark on the Island, or to be more exact, a small group of islands only 120 square miles in area but with a population of just over 320,000 which makes Malta the most thickly populated country in Europe. The official languages are Maltese and English, but other languages are also widely spoken.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education
The Director of Education
Education Office
Lascaris, Valletta

Ministry of Health
The Chief Government Medical Officer
Merchants Street, Valletta

Ministry of Labour and Social Services
The Director of Social Services
310 Republic Street, Valleta

The Principal Welfare Officer
469 St Joseph High Road, St. Venera

Coordination and Planning - The Federation of Societies for the Handicapped coordinates the efforts and activities of 14 Voluntary Societies working with the physically and mentally handicapped. It is also represented on a Board set up by Government to coordinate the work of Government Institutions and Voluntary Bodies in the field of work for the handicapped.

VOLUNTARY ORGANIZATIONS

Primary Concerned with Mentally Retardation

Ghaqda Ghall - Mentalment Inkapacitati
Society for the Mentally Handicapped
c/o 102, Fleur de Lys, B'Kara

(formerly the Malta Welfare Society for the Mentally Handicapped)

Organized in 1963, the Society has over 400 members - parents, professionals and interested citizens. It maintains a registration and counseling service and a weekly day centre. However, the Society's main efforts have been directed to providing information to the public and to encouraging public and private agencies and organizations to extend and improve their services to the mentally retarded. The Society for the Mentally Handicapped works in close cooperation with the Down's Syndrome group and the Kindergarten for the Handicapped (Parents group).

The Society brings to Malta from time to time experts in mental retardation from various countries. It is a member of the International League of Societies for Persons with Mental Handicap (1966) and the World Federation for Mental Health.

Other

Commission for the Sick
Malta Catholic Action
"Villa Monsignor Gonzi" Residential Home for
  the Handicapped
Tal-Provvidenza, Siggiewi

PUBLICATIONS

The bilingual journal published by the Society for the Mentally Handicapped, Qawwi Qalbek, frequently includes professional articles on mental retardation as well as information for parents.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, and Consultation to Parents - Since 1966 the Society for the Mentally Handicapped has maintained the J.F. Kennedy Memorial Center, the first such service in Malta. Additional services are continually being developed by the health authorities.

Education - The Department of Education is responsible for organizing classes and special schools for mildly and moderately retarded children and young people (educationally sub-normal and severely sub-normal).

Work Training and Employment - The Welfare Division of the Ministry of Labour and Social Services is responsible for coordinating welfare matters in respect of the handicapped. A Welfare Officer is assigned to each handicapped person once such a case is referred to the Division. The Welfare Officer is responsible to advise the handicapped/disabled person or his parents/guardians as to his needs and liaise with respective government and voluntary agencies. It also runs a sheltered workshop for vocational training and occupation of the physically/mentally and emotionally handicapped.

Financial Assistance - Families with mentally handicapped children under 16 qualify for children's allowances and handicapped persons over 16 years of age qualify for a state pension. Other forms of assistance are available under the National Assistance Act.

Medical Care - Sickness assistance is available to households with mentally handicapped persons, as is free supply of medicines.

Residential Care - St. Vincent de Paule Hospital and Mt. Carmel Hospital provide a limited amount of residential care to profoundly mentally handicapped children and to aged people. There are a number of private homes caring for handicapped persons. In 1968, the first home specializing in the care of people with mental handicap was opened under private (church) auspices.

Recreation - The Society for the Mentally Handicapped is able to provide a certain amount of voluntary aid.

OTHER INFORMATION FOR VISITORS

For visits to hospitals and clinics contact the Department of Health; for visits to special schools and training centers contact the Department of Education.

School Holidays - Mid-Term - 1st, 2nd and 3rd of November, Christmas, Easter and Summer - mid-July to mid-September.

MAURITIUS

Mauritius is a volcanic island some 550 miles off the east coast of Madagascar, forming part of the Mascarenes Group. Its climate is semi-tropical.

The population of over 985,000 is multiracial; the majority are Indians of Hindu and Muslim faith; the Creoles, of mixed European and African descent, are the next largest community and are mostly Roman Catholic. The minority communities are Chinese and Franco-Mauritian. The population density is very high. The official language is English, but French is extensively used, as is "creole", a vernacular derived from French.

The island was colonized by the French from 1715 till 1810, then was transferred to the British until 1968 when Mauritius became an independent member of the Commonwealth, with a parliamentary type of government; it is a member of the United Nations.

Mauritius is predominantly agricultural and lives mainly on the production of cane sugar, but other industries, mainly textile, are developing rapidly, giving employment to a large number of young women. This is changing fundamentally the way of life of the Mauritian population.

The country is at present faced with major problems such as overpopulation, unemployment, housing and education. 31.2% of the population is under 15. The average life expectancy is 68 years. Literacy is high. Primary and secondary education are free and although not compulsory, 91.5% of primary school-age children are enrolled.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministry of Social Security
Astor court, Lislet Geoffroy St., Port Louis

Ministry of Health
5th Floor, Emmanuel Anquetil Building, Sir S. Ramgoolam St., Port Louis

Ministry of Education
Government House, Port Louis

Ministry of Employment
Emmanuel Anquetil Building, Sir S. Ramgoolam St., Port Louis

National Council for Rehabilitation of the Disabled

The National Council for Rehabilitation of the Disabled is a semi-official body functioning under the Ministry of Social Security. This council is concerned with all types of handicaps, including mental retardation. The chairman is the Permanent Assistant Secretary of the Ministry of Social Security. Representatives of Ministries and Voluntary Organizations concerned sit on this council.

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

Citizen

Association de Parents d'Enfants
Inadaptés de l'Ile Maurice (APEIM)
39, St Paul Road, Phoenix

Association of Parents of Retarded
Children of Mauritius

The Association, founded in 1970 by a group of parents of mentally retarded children, has been a member of the International League of Societies for Persons with Mental Handicap since 1972. APEIM is an active member of the Mauritius Council of Social Service and the National Council for Rehabilitation of the Disabled.

Other Organizations which Include Mental Retardation

Mauritius Mental Health Association
Stanley, Rose Hill

PUBLICATIONS

The primary materials being utilized in the country are those distributed by the ILSMH.

A Teacher's Handbook on Disabilities by Ron Brouillette, Publisher UNICEF Mauritius- Rogers House - Port Louis

Mauritius Council of Social Service Directory Publisher Mauritius Council of Social Service c/o Social Welfare Division - Ministry of Social Security - 13-21 Edith Cavell St, Port Louis.

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Case Finding, Diagnosis and Assessment, Parent Counselling - In 1986, referrals are made to APEIM primarily by hospital and private health services. Some families are referred through social or educational services. The referral system has become more professional, focussing on early identification. There has been a 360% increase of children referred under the age of 2 years from 1982-1985 with 85% of all children coming to the organization being under the age of 7 years. Diagnosis/Assessment within the APEIM Organization is made at three levels:

Medical: Current health of the child and medical history. Children are referred on to other hospital or medical facility as deemed necessary.

Social: Family history, economic level and counselling with families to clarify needs and to refer child into appropriate APEIM or other services.

Educational: Screening and Assessment utilizing systematic developmental checklists measuring what the child can do and needs to do next. This intra-individual testing is marked on graphs to follow the child through appropriate intervention strategies.

Consultation to Parents: APEIM is a parents association and feels parents must be actively involved. Parent models exist specifically to train members in intervention strategies and parenting skills for children who have a mental or multihandicap. Trained family members and volunteers then go out and assist new families.

Education - There are as yet no state special programmes for children with any form of disability. Special education for children who have a mental handicap is limited to two voluntary associations:

The Mental Health Association, founded in 1973, supports the National School for Educationally Subnormal Children which serves 138 students, providing special education and prevocational training to children with a mild to moderate mental handicap.

The APEIM (Association of Parents of Children with Mental Handicap):

PROGRAMMES	STUDENTS SERVED
2 School Units	52
Pre School	12
Vocational Unit	38
Parent Volunteer Training Programme	206
Remedial Playgroups	66
Home Visits	35
	459

Work Training and Employment - The vocational section at APEIM trains in woodwork, industrial techniques, greenhouse production, gardening, housework and sewing. Subcontract work is done by both boys and girls. Several students have left the organization as they have acquired employment.

Medical Care - A doctor is attached to APEIM who refers to hospital or appropriate specialists and organizations. Medical diagnosis is difficult as there is no caryotyping and no neurologists available. Arrangements are made to send blood abroad but the budget is relatively small in relationship to high cost. Epilepsy appears high within the population and children not well controlled.

Residential Care - Most persons with a mental handicap live with a member of the extended family. Adults are placed in the overcrowded mental institution. Appropriate lifestyle programmes need to be established.

Financial Assistance - All the funds used for the yearly functioning budget of APEIM are found by different means: minimal government grant for the school (US $2,500 per year), member contributions, donations, flag day, sale of Christmas cards, and other fund raising activities.

For development projects, acquisition of equipment and technical assistance, APEIM has to seek help from abroad.

Recreation - Jaycees in Mauritius ran a one year Special Olympics Programme in 1983. Faith and Light has family programmes serving children, parents and friends. APEIM has leisure activities and sports as part of the curriculum. Each year students participate in a gala sports day and attend a 1 week camp.

Research - APEIM has been collecting data on children which are being compiled to give insight into programme effectiveness. In the early 1970s, APEIM carried out and published several surveys on incidence and needs.

Personnel Training - There is presently no state course for the training of personnel, although short seminars on the subject took place at the Mauritius Institute of Education in 1983. From 1975 to 1978, APEIM ran an evening course for the training of personnel, and refresher courses are regularly given in short seminars or work groups for staff, parents and volunteers.

Planning - National Level: At the request of the Mauritius Council of Social Service a plan by UN and ILO experts was accepted by the government in 1976. Implementation has, up to now, been limited to the setting up of the National Council for Rehabilitation in 1978. More recently a plan of integration in education starting at pre-primary level has been prepared by APEIM and the Ministry of Social Security in view of obtaining funding from UNICEF. This plan has been accepted by the government and UNICEF to begin in 1987.

APEIM level: APEIM's 5 year plan has given priority to upgrading and evaluation of existing services, parent information and counselling, and public attitude change.

OTHER INFORMATION FOR VISITORS

Information and assistance in planning visits can be obtained from APEIM or the National Council for Rehabilitation of the Disabled (Lislet Geoffroy St, Port Louis).

School Holidays - 2 weeks around Easter, 6 weeks mid July to beginning September, 8 weeks mid November to mid January.

Visitors are not recommended to come during January, February and March as this is the cyclone season.

MEXICO

Mexico is the second most populous nation in Latin America and the third largest in size. It is a federal democratic republic of thirty one states, and a population of 81.9 million (1987 estimate); the Federal District, with the capital, Mexico City, has nearly 13 million people. The official language is Spanish, although some indigenous groups (about 1 million people) speak various Indian languages, descended from the Mayan, Toltec and Aztec civilizations.

Education is compulsory up to 15 years of age. The educational system has had a great increase in the last decades, and the literacy rate is 65%. The social security system, which provides extensive health care including its own hospitals, has also been growing. Life expectancy is relatively high (61 years). While rehabilitation services for physically handicapped persons are quite well developed in many areas, services for those with mental retardation are increasing but are far from sufficient.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Secretaría de Salubridad y Asistencia Reforma y Lieja N° 7 México, D.F.	Secretariat of Health
Dirección de Salud Mental	Department of Mental Health
Dirección de Rehabilitación	Department of Rehabilitation
Sistema Nacional para el Desarrollo Integral de la Familia (D.I.F.)	National System for Integral Development of the Family
Secretaría de Educación Pública Argentina N° 28 C.P. 06029, México, D.F.	Secretariat of Public Education
Dirección General de Educación Especial Altavista N° 35, San Angel C.P. 11000, México, D.F.	Department of Special Education
Secretaría de Gobernación Bucareli 99, México, D.F.	Secretariat of State
Departamento de Prevención Social Tacuba 8, México 1, D.F.	Department of Social Insurance
Tribunal para Menores Obreto Mundial Núm. 76, México, D.F.	Youth Protective Service
Secretaría de Trabajo y Bienestar Social Av. Paseo de la Reforma N° 426 México, D.F.	Secretariat of Labor and Social Welfare

VOLUNTARY ORGANIZATIONS

Primarily Concerned with Mental Retardation

Professional

Sociedad Mexicana para el Estudio
Científico de la Deficiencia Mental
Toribio Medina N° 100
C.P. 06880, México, D.F.

Mexican Association for the
Scientific Study of Mental
Deficiency. President:
Prof. Jorge González Peral

Organized in 1966, it is affiliated with the International Association for the Scientific Study of Mental Deficiency.

Citizen

Confederación Mexicana de
Asociaciones en Pro del
Deficiente Mental
Latinos N° 36, Colonia Moderna
C.P. 03510, México, D.F.

Mexican Confederation of
Associations for the Mentally
Deficient. President:
Sr. José Barroso Chávez

Founded in 1975 in Mexico City, the Confederation has connections with many parent sponsored groups in other parts of the country. One of its early important goals has been to provide work experience for people with mental retardation after leaving school. Another goal is to help families help their children, especially those families with marginal resources. The Confederation provides information to the general public and influences public opinion. Member of ILSMH since 1980, the Confederation hosted the League's General Assembly in November 1988.

RESEARCH

Governmental:

Departamento de Investigación,
Dirección General de Educación
Especial
Altavista N° 35, San Angel
C.P. 11000, México, D.F.

Research Division, Special Education
Department

Grupo de Estudios al Nacimiento (GEN)
Torres Adalid 21, 4° piso
Col. Del Valle
C.P. 03100, México, D.F.

Birth Studies Group

Other:

Universidad Nacional Autónoma de México
Facultad de Psicología
Departamento de Investigaciones
Cd. Universitaria, Coyoacán, México, D.F.

National Autonomous University
Psychology Faculty
Department of Research

Centro Universitario de Servicios e Investigaciones y Educación Especial Cerrada de Micros 62, 2a. Col. del Periodista, México, D.F.	University Center for Services and Research in Special Education
ENEP - Iztacala Coordinación de Psicología Ave. de los Barrios s/n, Los Reyes Iztacala, C.P. 54030 Tlanepantla, Edo. de México	Coordination in Psychology

PUBLICATIONS

Professional sources which frequently publish articles on mental deficiency:

Publications of the Department of Special Education
(Secretariat of Public Education)
Talleres Imprecolor S.A.
Durango 252, 1er. Piso
C.P. 06700, México, D.F.

Other:

CONFE Journal published quarterly by the Confederation Mexicana de Asociaciones en Pro del Deficiente Mental, A.C.

Guía para Padres (Guide for Parents) has also been published by the Confederación.

Directories:

Directory of special schools incorporated in the Department of Special Education is published by the Secretariat of Public Education.

Directory of Services of the Mexican Red Cross (free)
Luis Vives 200
Col. Morales Polanco
C.P. 11510, México, D.F.

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Case finding, diagnosis and assessment, consultation to parents - is carried out by the hospital services, in departments of pediatrics, psychiatry and neurology. Many general practitioners still lack information on mental retardation, and multidisciplinary training of other medical professions and of psychologists and teachers has not yet been well developed but is proceeding.

The private schools and parent associations attempt to meet needs in parent counselling but can do so only to a limited degree.

Education - The programs of government schools under the Department of Special Education are increasing, but serve only children with mild or sometimes moderate intellectual handicaps. Severely or profoundly retarded children may find a place in a private school if parents can afford it. Special schools exist mainly in the cities and larger towns. Integration of handicapped and non-handicapped children in school classes has been little discussed but is likely taking place in many smaller village schools. See for example the work in Mexico of David Werner, and his book Disabled Village Children (Hyperion Foundation, Palo Alto, California, USA). It shows local workers, parents and family members, including brothers and sisters, how to help the disabled member of the family through simple aids and suggestions, valuable in any country.

Work training and employment - In the special government schools in Mexico City vocational training workshops operate after the regular school hours. In addition there are other training workshops, sheltered enterprises and protected workshops under private auspices, for example, that of the Mexican Confederation. Unfortunately the number is far from sufficient for the demand. To date there is no legislation to encourage employment of persons with mental retardation.

Medical services - The Mexican Social Insurance Institute operates its own hospitals, clinics, pharmacies and other medical facilities, through regional and local boards. Services for non-insured workers and their families are provided by the parallel Health Department system or private physicians; government employees are covered by their own health insurance system. It is not always easy however for mentally retarded children or adults to be accepted for ordinary health and hospital services.

Residential care - Official: There exists one pavilion in a government hospital, without programs. Some directors who wish to improve and implement new programs have met obstacles on the part of the workers' unions (syndicates).

Private: There are a number of private residential facilities; among them one can encounter cases which are only accepted for financial gain with very little attention paid to the residents' needs; others have adequate programs and attention, but are of course completely segregated.

Financial assistance - official financial help is very limited. Private institutions have to depend on personal donations or gifts from foreign foundations.

Recreation - A leisure time program for young adults was initiated in 1981 by the Confederación Mexicana. Other voluntary associations promote recreation programs, for example, Special Olympics and "Promoción Deportiva."

Research - There exists a good level of research under the auspices of the above mentioned institutions, despite budgetary limitations.

Personnel training - The Secretariat of Public Education provides specialized teacher training schools in various cities. Psychology departments in both public and private universities provide accredited courses in mental deficiency. There is also a "Colegio de Profesionistas de Educación Especial" located at Playa Regatas N° 473, Col. Marte, Deleg. Iztacalco, C.P. 08830, México, D.F.

Coordination and Planning - on the government level and in the field of education is the responsibility of the Department (Dirección General) of Special Education.

Planning for the prevention of birth defects is the concern of the private organization GEN (Grupo de Estudios al Nacimiento).

Architectural planning courses on accessibility are offered by the National Autonomous University.

Legislative planning is an ongoing concern of the Confederación Mexicana; a draft law is being prepared for presentation to the Senate. The Confederación is further studying the possibility of creating a Foundation on Guardianship to help resolve the economic questions of persons with mental deficiency whose parents are no longer living, and also the creation of "casas hogar" (group homes) which do not as yet exist in Mexico.

OTHER INFORMATION FOR VISITORS

There is no official agency to help plan programs for visitors, but the Confederación Mexicana has done so at times despite limited resources.

School holidays - The official school calendar runs from September to June with two vacation periods, in December and in the Spring during the Easter Holy Week.

NEPAL

The Kingdom of Nepal occupies a beautiful area between India and Tibet; its level southern border is partly forested, partly cultivated. To the north is the main sector of the Himalayan range, including Mt. Everest. Nepal is governed by a constitutional monarchy, linking the country's 75 districts. The population (1987 estimate) is 17.8 million; the capital city, Kathmandu, has 400,000. 90% of the population is Hindu (Buddhist 5%, Islam 3%). 93% work in agriculture.

Special services to persons with mental retardation began around 1978 through the HANDS Foundation of Maryknoll Fathers Adam Gudalevsky and Joseph Thaler, with emphasis on small units for children and training for parents and helpers in simple care techniques. In 1981 the Government, at the request of Her Majesty the Queen, set up a committee to open a school in Kathmandu with an attached hostel for orphaned retarded children. Soon after, the Nepal Association for the Welfare of the Mentally Retarded (AWMR) was founded in which all the various agencies active in the field are members. A partnership project between the Norwegian Association for the Mentally Retarded (NFPU) and AWMR began in 1985, making the services of two expatriate consultants, Jane and Ron Brouillette plus four volunteers, available to assist in organization especially of services in the rural and outlying areas, and in strengthening the existing services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Labour and Social Welfare
  Social Services National Coordination Council (SSNCC)
  Mr. Madav Om Shrestha, Executive Director
  Brikuti Mandap, Kathmandu

  Health Services Coordination Council (HSCC)
  Mrs. Gauri K.C., Member Secretary
  Brikuti Mandap, Kathmandu

Major responsibility for coordination and monitoring activities related to disabilities rests in the above agencies, as well as planning for future developments and research.

VOLUNTARY ORGANIZATIONS

The Association for the Welfare
  of the Mentally Retarded (AWMR)
Dr. Mahendra Prasad, Chairman
Mr. S.N. Shrivastava, Secretary
G.P.O. Box 3535
Kathmandu

AWMR functions both as a membership organization, and as a semi-governmental agency providing services, with full delegated authority and certain subsidies from the Government (SSNCC/HSCC). Most of the early activities were developed in the Kathmandu Valley, but are now spreading to other parts of the country.

Thus specific planning and coordination of programs for persons with intellectual disabilities are the function of AWMR; as well as public information dissemination. All other retardation service organizations are affiliated with AWMR. In 1987, AWMR was accepted as a national member society of the International League of Societies for Persons with Mental Handicap.

Among AWMR members are the Nav Jyoti Special Children's Unit, which carried on the work of the HANDS Foundation and has five branch units; St. Xaviers Social Services Unit which includes training courses with some emphasis on mental retardation, as well as providing direct counselling and social work services. Other voluntary organizations are citizen management committees for facilities servicing retarded persons and their families. Such committees consist of civic and political leaders and involved parents.

RESEARCH

In 1981, Father J. Thaler in cooperation with Mr. Shrestha, then in charge of the Handicap Committee of SSNCC, made a sample prevalence study indicating a much higher self report rate than in other countries. In 1983, research carried out by Dr. Zena Stein for WHO on developmental milestones resulted in a screening tool to detect degrees of delay; this was part of a nine-country study, funded by the Dutch Bisschop Bekkers Foundation.

PUBLICATIONS

Mental Retardation in Nepal, A Nationwide Study by Fr. J. Thaler, 1981
Some of Our Sons and Daughters by Fr. A. Gudalefsky, 1983
St. Xaviers School, P.O. Box 50, Kathmandu

International Pilot Study of Severe Childhood Disability Dr. Z. Stein 1983,
Bisschop Bekkers, P.O. Box 3400, A.K. Utrecht, The Netherlands.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Early intervention, family counselling - Infant screening and intervention have been started at the maternity hospital by a German trained physiotherapist. UNICEF and WHO have developed a community based rehabilitation project with a model program in Bhaktapur; mental retardation is included in the training courses (Carolyn Arnold, P.O. Box 107, Kathmandu). Save the Children USA assists some retarded, multi-handicapped children. AWMR's Counselling Centre in Kathmandu provides home-based training; a toy and equipment lending library has been set up, a service which is to be made available also in rural areas as the planned regional resource centres are established. Following the HANDS example, parent seminars have been reintroduced and will lead to formation of more parent groups.

Education and social and work skills training - A few special classes exist in regular schools but the responsibility is still mainly with the voluntary organizations, AWMR and its members. In 1987, a total of 134 persons (mostly children but a few adults) were receiving educational training from 29 teachers in 12 different units. These numbers will increase rapidly as more personnel become available. The Baneswor industrial centre will provide work opportunities as well as generating some income for AWMR's programs.

Personnel preparation, one of the biggest hurdles in a country beginning services, has become systematic. Two courses have been organized on a national level. The first competency - based course was held in May, 1987. A self-instruct manual written in simple Nepalese with photos, as well as a video supplement, have been prepared. Administrative staff of AWMR is being trained and organizational development is taking form, with long and short range planning sessions offered.

Participation in the Special Olympics is becoming popular. The first national meet was held in 1987; a few months later four athletes attended the International Games in the USA.

Public information materials are considered a priority and an active media blitz has been underway, one part focussed especially toward parents of young children. Brochures, a slide-script set, comic strips and video tapes have been produced.

OTHER INFORMATION FOR VISITORS

The best time to visit Nepal is from October to May. June to September is the rainy season when the mountains are cloud covered and trekking impossible. Information may be requested from SSNCC or AWMR about their programs.

Schools are closed the first two weeks in January and the first two weeks in October.

THE NETHERLANDS

The care for the mentally retarded in the Netherlands is a shared responsibility of the government and of private organizations. However, provision of care is almost totally in the hands of private, nonprofit organizations and agencies that operate under a tripartite (Catholic, Protestant, non sectarian) system of agencies which receive subventions from the appropriate public bodies. The government, through financial, regulatory, advisory and planning measures, makes the policy, in close cooperation with the private organizations. Increasing decentralization is giving more responsibilites to the 12 provincial governments.

Education is compulsory from ages 5 through 15. Special education has long been a part of the Dutch public school system, schools for moderately and severely retarded children having been a part of the official system since 1950, and schools for mildly retarded since the 1920's. Residential homes and schools under private auspices have existed since the turn of the century, but the 1960's saw an extensive and differentiated development of services, for retarded adults as well as children.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerie van Welzijn, Volksgezondheid en Cultuur Steenvoordelaan 370 (Mailing-address: P.O. Box 5406) 2280 HK Rijswijk (near The Hague)	Ministry of Welfare, Public Health and Culture
Geneeskundige Inspectie voor de geestelijke Volksgezondheid Afd. Intra- en extramurale zorg voor geestelijk gehandicapten	Medical Inspection for Mental Health Service Dept. Intra- and extramural care for mentally handicapped persons
Afdeling Maatschappelijke Dienstverlening	Department of Social Services
Ministerie van Onderwijs en Wetenschappen Europaweg 4 (mailing-address: P.O. Box 35000) 2700 LZ Zoetermeer	Ministry of Education and Science Includes special education and university level research.
Hoofdinspectie Speciaal Onderwijs Laan van Vollenhove 3227 3706 AR ZEIST	Chief Inspectorate for Special Education
Ministerie van Sociale Zaken Zeestraat 73 2518 AA The Hague	Ministry for Social Affairs
Afdeling Complementaire Sociale Voorzieningen	Department for Social Employment including sheltered workshops

Ministerie van Justitie
Schedeldoekshaven 100
2511 EX The Hague

Ministry of Justice
Includes child protection and supervision of certain homes and institutions

PLANNING AND COORDINATION

Interdepartementale Stuurgroep Gehandicaptenbeleid
Dr. Reyersstraat 8
P.O. Box 439
2260 AK Leidschendam

Interdepartmental Steering Committee on Rehabilitation Policy
Includes the above Ministries with participation also of the Ministries of Transport and Housing

VOLUNTARY ORGANIZATIONS

Stichting Federatie van Ouderverenigingen
Stadhouderslaan 43
3583 JC Utrecht

Federation of Parents Associations for the Mentally Handicapped

Unites the 4 national parents' associations:

Vereniging van Ouders van Geestelijk Gehandicapten
Parkweg 59 - P.O. Box 103; 3600 AC Maarssen.
Established in 1976 by a union of 'Helpt Elkander' (general - 1952) and 'Voor het Zorgenkind' (Catholic - 1957)

Philadelphia (Protestant - 1957)
Stadhouderslaan 43, 3583 JC Utrecht

Dit Koningskind (Calvinist - 1973)
Zonnehof 12 - P.O. Box 376, 3800 AJ Amersfoort

Vereniging Gehandicaptenzorg Gereformeerde Gemeenten (Calvinist - 1975)
Houttuinlaan 7, P.O. Box 404, 3400 AK Woerden

Through the Federation they are members of the International League of Societies for Persons with Mental Handicap. They receive government subsidy and over the years have stimulated action in all program areas, especially with regard to social security, recreation and provision of group homes/hostels in the community, as well as providing mutual support to their members and information to the public. Total membership in 1985 60,000 including 27,500 parents of mentally retarded persons.

Nationale Ziekenhuisraad:
Subsectie Zwakzinnigenzorg
Oudlaan 4
P.O. Box 9696, 3506 GR Utrecht

Association for Intramural Care: Subsection Mental Retardation Care - Unites the private organizations providing residential care.

FIAD, Federatie Dagverblijven en Tehuizen voor Geestelijk Gehandicapten
Dukantenburg 78, 3437 AE Nieuwegein

The private organizations providing day-centers for children and adults and group homes/hostels.

NOSW, National Overlegorgaan Sociale Werkvoorziening Elviraland 73, 2591 GG The Hague	National Association for Sheltered Workshops
Overlegcentrum Buitengewoon Onderwijs Herenstraat 6, 3512 KC Utrecht	Association for Special Education Covers the three national special education organizations.
SOMMA Landelijk Samenwerkingsorgaan Maatschappelijke Dienstverlening aan Geestelijk Gehandicapten Utrechtseweg 44, P.O. Box 318 3700 AH Zeist	Federation of Social Pedagogic Care Agencies for the Mentally Retarded Unites about 50 regional specialized social work organizations.

All the foregoing organizations are joined together in the:

Landelijk Overlegorgaan Zwakzinnigenzorg (LOZ) Korte Elisabethstraat 6 P.O. Box 415 3500 AK Utrecht	National Association for the Care of Mentally Retarded

Other Organizations that Include Mental Retardation in their Programs:

Nederlands Genootschap ter Bestudering van de Zwakzinnigheid Korte Elisabethstraat 6 P.O. Box 415, 3500 AK Utrecht	Dutch Society for the Study of Mental Deficiency Established 1964, a founding member of IASSMD
Bisschop Bekkers Instituut Korte Elisabethstraat 6 P.O. Box 415, 3500 AK Utrecht	Stimulates research, promotes contacts, between research bodies; coordinates aid to developing countries.
IDC/NIG National Informatiesysteem Gehandicapten Zakkendragershof 44 P.O. Box 70, 3500 AB Utrecht	National Information System for Disabled Persons supported by the voluntary organizations for mentally and physically handicapped persons.

PUBLICATIONS

Klik - Maandblad voor de zwakzinnigenzorg P.O. Box 415, 3500 AK Utrecht	Published monthly giving general information on the whole field, especially on actual developments.
Ruit - Bishop Bekkers Institute P.O. Box 415, 3500 AK Utrecht	Information and news bulletin on research and research management.

Journals are published by the National Association for Sheltered Workshops, by the Social Pedagogic Care Associations and by the national special education associations. The four parents organizations and the Federation of Parents Organizations also publish journals.

Directory: Vademecum Zorg voor Geestelijk gehandicapten

Guide for the Care of Mentally Handicapped. Edited by Samson/Stafleu, Alpeh ann de Rijn/ Brussels, ISBN 90-6500-415-3

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Early detection, facilitating early treatment, is available through regional offices, connected with consultation and health services. Pre-natal detection is carried out by seven genetics centers connected with academic hospitals. Three academic centres can provide information on the hereditary aspects of mental retardation. The social-pedagogic centers provide consultation to parents, if necessary through special observation clinics.

Education - The Netherlands has pioneered in developing free, specialized education under public auspices; in 1985 a new law on special education took effect. The system has 14 categories of special education, two of which serve the mentally retarded (accommodating 75% of the total special education enrollment).

-Special school for children with learning disabilities. Minimal age of admission 4 1/2 years (in special kindergarten), maximal age 17; additional special school to age 20.

-Special school for children with severe learning disabilities. Minimal age of admission 4 1/2 years (in special kindergarten); maximal age 20. This type of special school gives special attention to the individual pupil. Motor skills are developed and training in daily living is an important part of the curriculum.

There are no special classes for the mentally retarded in the regular schools. School Advice Services are available for teachers in regular schools, providing specialized help if mentally retarded children attend regular classes. However it is estimated that over 95% of the children needing special education are receiving it in the special schools.

Work, Training and Employment - The Dutch also pioneered in providing large industrial type sheltered workshops. During the long period of full employment in the country mildly retarded young people easily found employment in industry or commerce, or else were placed through the social pedagogical service. Workshops (which often serve a mixed clientele of handicapped persons) accepted severely and even profoundly retarded persons at a time when other countries had hardly begun to serve the moderately retarded. Legislation which took effect in 1969 mandated all municipalities to create work opportunities, within or outside workshops, for handicapped individuals. But it also provided for the creation of day centers for adults not able to work regularly, with low productivity. Since 1949 persons in sheltered employment have received wages and since 1964 enjoy the same social benefits as employees in open industry. Since 1985 the government has put a stop to the growth of sheltered workshops.

Medical Care - In addition to the broad general programs of medical care, 1968 legislation provides a special insurance scheme for severe medical risks and has provided substantial relief to the families of severely and profoundly mentally retarded children and adults. The law is broadly written and includes care, along with therapy.

Residential Care - In 1983, there were 158 residential institutions serving 29,478 mentally retarded persons. In the last decade the policy has been directed to smaller institutions. There is only one institution now of 940 residents and two of approximately 750 residents; all other institutions are smaller. In the 158 institutions work 27,869 professionals; total costs amount to Dfl:2.770.000.000, and are taken care of by the Social Security System. With one exception, mentally retarded people are no longer found in psychiatric institutions.

Extra-mural Care - Since 1970 there has been a rapid growth of day-centres and hostels. In 1983, 11,450 places in day centres and 9500 in hostels were available and will increase. Staff in day-centres 3950, Dfl:333,000,000. The last decade has seen much attention to family-care programs which give families with a handicapped child assistance of various kinds (both social pedagogical and help in housekeeping).

Financial Assistance - Mentally retarded persons over 17 years of age are entitled to a personal income from the AAW, a social insurance system, unless they work in a Sheltered Workshop or elsewhere. The services are free, but for a contribution to the costs of residential care and hostels related to income.

Recreational Programs - are to considerable extent provided by the parents' associations. Holiday homes and camps have been particularly successful. The social-pedagogues, responsible for the social adjustment, are very much concerned with organized leisure time activities particularly for the older adolescents and adults. Judo and other sports are promoted by the Nederlande Sportbond voor Geestelijk Gehandicapten (Koninginnegracht 101, 's-Gravenhage).

Research - is being conducted under private auspices, universities and residential institutions with financial support from the government. The Dutch Society for the Scientific Study of Mental Deficiency is concerned with promotion and coordination of research projects, and particularly in stimulating multi-disciplinary clinical and field research, and was instrumental in starting the Bishop Bekkers Institute.

OTHER INFORMATION FOR VISITORS

Request for information and assistance in arranging professional visits can be directed to the International Relations Departments of the Ministries noted above and to the voluntary organizations.

School Holidays - the months of July and August.

NEW ZEALAND

Including all the islands within its administrative orbit, New Zealand reaches from the tropics to the antarctic, but most of its population (3.2 million) lives in the North and South Islands. 85.8% are of European origin, 8.9% Maoris and 5.3% other races. The Maoris are of Polynesian origin having migrated to New Zealand between the 10th and 14th centuries. They have had full citizenship since 1840 and equality with persons of European descent.

New Zealand has been self-governing since 1852. Education has been free and compulsory for all children over 5 years since the 1880's. The current social security and medical care provisions date initially from 1938. Most social services in New Zealand are provided by the State without cost to the user.

Services for mentally retarded persons followed the pattern set by Great Britain and at mid-century were largely limited to a few public school classes for the mildly retarded (known then as mentally backward) and institutions (known as psychopaedic hospitals or hospitals and training schools) for those whose removal from the community was then considered necessary.

A major shift occurred in 1949 with the founding of the Intellectually Handicapped Children's Society, now the New Zealand Society for the Intellectually Handicapped. The Society has stimulated a revolution in public thinking, professional attitudes and government policy and has pioneered a variety of community services. With 38 branches and approximately 1750 staff, IHC is the largest voluntary organization in New Zealand. The range of services it provides for the 5,500 people with intellectual handicaps and their families encompasses pre-schools, vocational opportunities, residential homes for both children and adults and home support programmes. Mildly handicapped children are not considered "intellectually handicapped"; occasionally some as adults may be included in IH services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Health	
Division of Mental Health PO Box 5013 Wellington	Responsibility for supervision of regional and local Hospital Boards operating the larger special institutions or psychopaedic hospitals.
Ministry of Work and Development	
The Commissioner of Works PO Box 12-041 Wellington	Responsibility for approval of plans and design of buildings when government subsidy is paid to IHC.
Department of Education	
Division of Special Education Government Buildings Private Bag Wellington	Responsibility for education of all intellectually handicapped school age children.

Department of Social Welfare

Director General
Private Bag
Wellington

Responsible for welfare benefits and community services, for day care accommodation and work opportunity of people with intellectual handicaps.

VOLUNTARY ORGANIZATIONS

The New Zealand Society for the Intellectually Handicapped, Inc. (IHC)
Mr. J B Munro, National Director, National Office
Private Bag
Wellington

One of the earliest national societies to be organized (1949), the IHC has been an active and strongly supportive member of the International League of Societies for Persons with Mental Handicap since 1966, among others, supplying a President (D.M.G. Beasley MD, President of IHC & ILSMH) and organizing Pacific regional conferences in 1972 and 1984.

Parent Special Action Groups within IHC:

Trust for Intellectually Handicapped People
Mrs Lou McDonald, Director
PO Box 6549 Te Aro
Wellington

The Autistic Sub-committee
Mrs Philippa Stephens, Secretary
5 Buchanan Street
Wadestown
Wellington

The Down's Association
Mrs Ngaire Brown
PO Box 4142
Auckland

Parent-to-Parent
PO Box 4232
Hamilton East

APAC - The Asia and Pacific Action Committee
Mr Don Wills
IHC Auckland Branch

Provides partnership assistance to groups in numerous Pacific Island nations (e.g. Fiji, Western Samoa, the Cook and Solomon Islands, Vanatu, Tonga, Tuvalu, also Nepal, Malaysia, Philippines.

PUBLICATIONS

Mental Handicap in New Zealand
Published by the N.Z. Association of Teachers of the Mentally Handicapped
PO Box 5697, Auckland

The Australian and New Zealand Journal of Developmental Disabilities
Published for the N.Z. Association for the Scientific Study of Mental Deficiency and the Australian Society for the Study of Intellectual Disabilities, Unit for Rehabilitation Studies School of Education, Macquarie University, North Ryde, N.S.W. 2113, Australia.

IH Review
Published by the N.Z. Society for the Intellectually Handicapped, Ms Deborah Willett, Editor, IHC National Office, Private Bag, Wellington

These journals are published quarterly.

Directories

Digest of Services for Disabled Persons
Advisory Council for the Community Welfare of Disabled Persons
Department of Social Welfare
Private Bag 21
Postal Centre
Wellington

Directory of Special Education and Guidance Service in NZ
Department of Education
Wellington

Community Care
New Zealand Society for the Intellectually Handicapped
PO Box 1063
Wellington

There are also several regional directories of services.

RESEARCH

The New Zealand Institute of Mental Retardation
Mrs Anne Bray, Director
Department of General Practice
Medical School
Dunedin

Human Genetic Research Unit
Department of Human Genetics and Community Medicine
Auckland Medical School
Private Bag
Auckland

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Case Finding, Diagnosis, Assessment, Consultation with Parents - There is no one organization directly responsible for case finding which therefore in infancy depends on the concern of parents and the level of awareness of obstetricians, nurses, family doctors and paediatricians. A noteworthy service is provided throughout the country by the visiting nurses of the Plunket Society, an infant health service, who see more than 90% of all newborn babies and maintain contact for the first five years. Diagnosis in infancy may be made by general medical practitioners and is usually confirmed by a paediatrician. Children may be referred to hospital Child Health clinics which provide child guidance services and are extending their work for families with a handicapped child. Counselling of parents is given by family doctors, paediatricians, psychologists of the Department of Education, and social workers employed by IHC.

A survey of the incidence of mental retardation has been done. There is no national register of retarded persons and no national register of children at risk, although in some hospitals paediatricians maintain "at risk" registers.

Education - School attendance is compulsory for all children but severely handicapped children are still excluded in many areas. IHC continues to seek alteration to the Education Act which permits this discrimination. Pre-school services depend largely on voluntary effort but are subsidized by the State. Many kindergartens and play centres will accept intellectually handicapped children whose admission is supported by IHC staff or psychologists of the Education Department. IHC conducts pre-school centres for children not approved for admission to kindergarten and play centres. School-age children attend either a special class located within an ordinary school or separate special schools, provided by Education Boards. Selection for admission is made by psychologists of the Education Department who assess social as well as mental development, and who act as consultants to the teachers. There is also a medical examination.

The Home Training Section of the Department of Education's Correspondence School provides a service to over 100 handicapped children living in isolated areas by regular mailing of individualized learning materials, consultation with parents and a personal visit at least once a year.

Private (other than State) education is given at boarding schools such as St. Raphael's Home of Compassion (Carterton), Marylands Residential Special School for Boys (Christchurch) and Hohepa (Steiner) Home-schools (Napier and Christchurch).

Work Training and Employment - Psychologists of the Education Department and psychologists and psychiatrists in the Health Service cooperate with voluntary organizations to make assessments or give advice concerning the placement of young persons in workshops and work training programmes. Training is offered through vocational services of the IHC, in workshops of the four psychopaedic hospitals and in sheltered workshops in Auckland and Christchurch of some local volunteer groups. For most persons, employment within a workshop continues indefinitely. Very few moderately and severely retarded persons are in open employment in New Zealand although it is in the aim of the IHC to place as many as possible in outside employment and considerable progress is being made.

Medical Services - In New Zealand all hospital treatment and care is free. A charge is made for other medical consultations. The Department of Health's Child Health Clinics and medical staff give advice to parents of intellectually handicapped children, but medical care is given by general practitioners, paediatricians and general hospitals. Preventive measures against damage due to Rh factor are taken and the Guthrie test for PKU and other inborn errors of metabolism is carried out in all newborns. Vaccination against rubella and measles is widespread.

Residential Facilities - The New Zealand Society for the Intellectually Handicapped operates community family homes and hostels (through its local branches) which offer housing for persons with handicaps attending schools or workshops, provide some short-stay accommodation for all ages and ongoing accommodation for adults. At present the IHC cannot meet the demand for accommodation. Other residential accommodation is provided by the Rudolph Steiner Hohepa Homes for school children and young adults (usually the less severely handicapped), and St Raphael's Home of Compassion for physically and mentally handicapped women.

Within the community there are still inadequate services for people who are intellectually handicapped, forcing continuing placements in the large government psychopaedic hospitals, under management of the Hospital Boards.

Financial Assistance - The State gives subsidies on some capital expenditure by voluntary societies for the establishment and improvement of approved workshops, hostels, homes and day care centres. It subsidizes some staff salaries and pays maintenance subsidy for children living in hostels. Intellectually handicapped persons over 16 years receive a Social Welfare Invalidity Benefit (not dependent on insurance contributions) at the same rate as other disabled or chronically ill persons and may have an additional annual income up to $1,300. The IHC Trust arrangement has an increasing number of participants who are assured personal contacts and some financial support after the parents' death.

Recreation - A National Coordinator of Recreation oversees recreation services in IHC branches. Self-advocacy groups have become active in numerous branches.

Research - The Human Genetics Research Unit, Medical School, Auckland, is carrying out extensive studies, particularly in metabolic anomalies. Dr. Robert Guthrie has assisted in mass screening for PKU and other genetic conditions, using blood samples from all newborns in New Zealand and from those born under medical supervision in the Pacific Islands, Fiji, Rarotonga, Western Samoa and American Samoa, the Tokelau Islands and the British Solomon Islands. Promising work has started in the N.Z. Institute of Mental Retardation, initiated by the IHC.

Personnel Training - IHC is now offering a number of in-service courses to its staff. Other courses are available from universities, teachers colleges and by correspondence.

Planning - Officers of the New Zealand Society for the Intellectually Handicapped are in direct communication with relevant government departments conferring on the expansion of services, but there is no special inter-agency committee or comprehensive national planning group in operation.

OTHER INFORMATION FOR VISITORS

The National Director of the New Zealand Society for the Intellectually Handicapped will give advice and further addresses for contact.

The Education Department and the Health Department will offer advice or assist in arranging tours according to the visitor's academic or professional interest.

School Holidays - The annual period is from mid-December to the end of January; second and third weeks in May; mid-August to first week in September.

N I C A R A G U A

Nicaragua is the largest of the Central American Republics with coasts on both the Pacific Ocean and the Caribbean. Its population of more than 2 million is largely of mixed Indian and European (Spanish) origin. Long under Spanish rule, Nicaragua has been an independent republic since 1938. The capital city, Managua, has a population of 500,000. Spanish is the official language and the literacy rate for people over 15 years of age is about 60%. Recent information has not been received but it is known that in the urban areas special education services exist, as well as prevention, diagnosis and early stimulation as part of the mother and child health programs. Parent counselling and education of the public are responsibilities of workers in both health and education services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministerio de Educación Departamento de Educación Especial Complejo Cívico Camilo Ortega Saavedra Módulo "P", MED, Managua	Major function: Coordination and consultation.
Ministerio de Salud Dirección Materno Infantil Complejo Cívico Camilo Ortega Saavedra Módulo "P", MED, Managua	The Department of Mother and Child Services provides diagnosis and treatment.

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Early Diagnosis, Assessment and Treatment - is carried out under the supervision of the programs of the Ministry of Health, as well as by special education services.

Education - The Department of Special Education provides services to the extent possible in regular primary schools in the larger cities. Ten years ago two special schools were functioning in Managua under supervision of the special education department, Escuela Nacional de Orientación y Educación, and Escuela de Enseñanza Especial N° 2; a new Centro Nacional de Menores Especiales (CEME) was to be opened.

Residential Care - is provided in the mental hospital (Hospital Neuropsiquiátrico) which has a section for mentally retarded children.

Financial Assistance - Through the Ministry of Education, the State contributes to the salaries of special school teachers. Other expenses must be funded through private sources.

Personnel Training - is a responsibility of the Ministry of Education.

OTHER INFORMATION FOR VISITORS

Requests may be directed to the Ministry of Education.

School Holidays - The long vacation extends from December 1 until January 31 throughout the country.

NIGERIA

The Federal Republic of Nigeria is a member of the British Commonwealth and was a leader in the development of the West African Economic Community which includes 15 French, English and Portuguese speaking countries. It is Africa's most populated country (80 million people), with most living outside the major cities. Lagos is the capital city. There are almost 250 tribal and linguistic groups in Nigeria; English is the official language. Religions include Moslem, Animist and Christian.

There is a fairly uniform national school system, with over 4 million students in primary, secondary and technical schools as well as 16 universities, including faculties of law and medicine.

Since becoming independent in 1960 Nigeria has witnessed a slow, steady and uneasy progress towards national solidarity and self-fulfillment. Mental retardation services in Nigeria are generally provided through agencies that also deal with other handicapping conditions, since these conditions received attention earlier than mental retardation, traditionally the responsibility of the family and local community people. For the most part services have been missionary, volunteer, or university-operated, with funding from donations and fees, although in the past several years the state and federal governments have taken on partial funding responsibility. Additionally, services have mainly been for children, and are concentrated in major cities such as Lagos, Ibadan, Enugu, and Kaduna. Since the advent of the local government system in 1975, programmes are being initiated in more states of the Federation.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Federal Ministry of Health
Victoria Island
Lagos

Federal Ministry of Education, Special Education Section
Ahmadu Bello Way
Victoria Island
Lagos

Federal Ministry of Social Development, Youth, Sports and Culture
5 Kofo Abayomi Street
Victoria Island
Lagos

Committee for Handicapped Children
P.O. Box 1231
Ibadan, Oyo State

The 19 States have Ministries similar to the federal ones.

Planning

Association for Handicapped Children
c/o Institute for Child Health (ICH)
University of Lagos
Health Centre Bldg., Randle Avenue
Surulere, Lagos

The ICH, a service, training and research organization, was started in 1965. The Association, started in the same year, tries to coordinate the various government and voluntary services.

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

The Cheshire Homes of Nigeria, with headquarters in Lagos and branches at these locations:

Cheshire Home
91 Agege Motor Road, Mushin
Lagos

Oluyole Cheshire Home
P.O. Box 1425, Ibadan
Oyo State

The Nigerian Girl Guides Vocational Centre for Handicapped Girls*
c/o Chief (Mrs) T.O.A. Sodeinde, Chairman
16 OMO Osagie Street
S.W. Skoipe, Lagos

Nigeria Society for Handicapped Children*
Institute of Child Health
Randle Avenue, c/o P.O. 2081
Yaba, Lagos

* Became member of the ILSMH in 1986.

Other Voluntary Organizations which Include Mental Retardation

Nigeria National Society for
Rehabilitation of the Disabled
Orthopaedic Hospital
Igbobi, Lagos

This organization was started in 1971, and is an affiliate member of Rehabilitation International.

Child Care Social Services
Women's Voluntary Organization
c/o The Secretariat
21 Olonode Street
Yaba, Lagos

Child Treatment and Placement Home
146 Kirikiri Road
Ajegunle (Apapa), Lagos

Child Guidance Clinic
P.M.B. 1054
Yaba, Lagos

The Red Cross
c/o The Spastic Clinic
Orthopaedic Hospital
Igbodi, Lagos

Good Samaritan School for
Handicapped Children
P.O. Box 1231
Ibadan, Oyo State

Good Samaritan Movement
P.O. Box 4032
University College Post Office
Ibadan, Oyo State

"Gidan Yara Don Dakikai Da Tababbun" (School)
Opposite Government Secondary School
Zaria City, Kaduna State

PUBLICATIONS

Two directories of services for the handicapped, one for Nigeria, and one for the Lagos area, have been published by the Institute for Child Health:

Nigerian Mental Health Directory 1976, Edited by Prof. Amechi Anumonye and printed by the Lagos University College of Medicine.

Directory of Special Education Personnel and Facilities in Nigeria, a survey carried out by the Nigeria Educational Research Council (NERC), in collaboration with the Special Education Section of the Federal Ministry of Education (1979-80). Edited by A.O. Aduwo, NERC, Lagos

Other Directories include:

Directory of Institutions for the Rehabilitation of the Handicapped in Nigeria. Compiled by The Federal Ministry of Social Development, Youth, Sports and Culture, Victoria Island, Lagos, 1981.

ManPower Register of Professionals in the Field of Special Education. Compiled by The Special Education Section of the Federal Ministry of Education, 1986.

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Diagnosis and Assessments, Consultation to Parents, Education and Work Training - Child guidance clinics, schools and institutions are the most prevalent types of services. The clinics provide diagnosis and assessment, consultation to parents, and treatment, while the schools provide primarily non-academic training of a pre-vocational nature.

The government has established the Child Guidance Clinic which comes under the Ministry of Education; also the Educational Unit for the Handicapped at Orthopaedic Hospital, all in Lagos State. The latter also offers occupational therapy. The Institute for Child Health, in conjunction with the Lagos State Government and the Neurology Clinic of the Department of Pediatrics at the University of Lagos Medical School, provides a voluntary registry for the handicapped and encourages government action on their behalf. ICH also gives consultation to parents; diagnosis, assessment and medical services are available at the Institute and in other locations such as schools and institutions. The Orthopaedic Hospital in Lagos, as well as other hospitals, provide medical care.

The Nigerian Girl Guides Vocational Training Centre trains mentally handicapped girls, including those with additional physical handicaps, in self-care and social skills, and gives them a basic knowledge of academics, based on practical skills such as cooking, sewing and manipulative skills gained through a wide variety of craft work (such as tie-dye, batik, pottery, needlework and weaving). The Centre operates under the aegis of the Girl Guides Association, and is their national project, managed by a committee of professionals, volunteers and consultants. The day-to-day administration, training and supervision is undertaken by the teachers/administrators, with the support of other teachers and volunteers.

In 1981, to commemorate the International Year of Disabled Persons, 300 qualified handicapped students were offered scholarships for post secondary education ranging from academics, commercial, vocational, technical and professional studies. Two girls who are mentally retarded benefitted from this scheme.

Research - The ICH conducts some survey and biochemical research on mental retardation. Research on the adaptation of foreign intelligence tests for Nigerian use has been carried out in the Universities of Lagos and Ibadan, and the Child Guidance Clinic in Yaba under the umbrella of the Psycho-Educational Service of the Lagos State Ministry of Education.

Personnel Training - There is a shortage of trained personnel, but training has been done at the ICH and at the Teaching Hospital, College of Medicine, Department of Pediatrics, University of Lagos, as well as abroad. Also, occasional 1-day training seminars on mental retardation have been conducted by the ICH. As a result of a survey carried out by the Federal Ministry of Education in 1975, which highlighted the acute shortage of trained personnel for Special Education, 3.1 million Naira was allocated for such needed training in the third National Development Plan covering the period 1976-1980. This was for local and overseas training.

OTHER INFORMATION FOR VISITORS

This can be obtained from the Institute for Child Health and/or the Federal Ministry of Education.

School Holidays - December 13th - January 5th; Easter holidays - one week, July 5th - September 9th.

NORWAY

Norway has 4.2 million people and, the second lowest population density in Europe; it has one of the highest life expectancy rates, and an overall high standard of living.

In 1976, the Storting (Parliament) gave full approval to a Parliamentary Report on care and future policies for persons with mental retardation. The main points are: Care for persons with mental retardation must include education and treatment, suitable occupation, housing and meaningful leisure time activities; as far as possible, they shall have the same rights as other citizens; services shall be given in the local municipalities and services provided by different departments shall be coordinated. The work of the residential institutions shall be integrated with other services; the quality of life within the institutions must be improved. Their size is to be reduced and family size homes established in the community. Resources must be available for parents to take care of family members with mental retardation at home, funds to organize parent-to-parent support networks must also be available. Research and information sharing must receive greater emphasis, and finally, the rights of people with mental retardation shall be strengthened.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Kirke- og undervisnings-departementet postboks 8119, Dep. 0032 Oslo 1	Ministry of Church and Education
Kultur- og vitenskaps-departementet postboks 8020, Dep. 0030 Oslo 1	Ministry of Culture and Science
Forbruker- og Administrasjons-departementet postboks 8004, Dep. 0032 Oslo 1	Ministry of Consumer Affairs and Government Administration
Kommunal- og Arbeids-departementet postboks 8112, Dep. 0032 Oslo 1	Ministry of Local Government and Labour
Sosialdepartementet postboks 8011, Dep. 0030 Oslo 1	Ministry of Social Affairs
Helsedirektoratet postboks 8128, Dep. 0032 Oslo 1	Directorate of Health

The main responsibility for mental retardation is divided between the education and health authorities on the local (commune), county, (fylke) and national (central) levels.

VOLUNTARY ORGANIZATIONS

Primary Concern in Mental Retardation

Norsk Forbund for Psykisk
Utviklingshemmede, (NFPU)
Akersgatan 47
0180 Oslo 1

Norwegian Association
for the Mentally Retarded

Founded in 1967, the primary aim of the Association is to bring together parent groups in their own national organization in order to give their special viewpoints more public emphasis, and to represent more actively the still unmet needs and special rights of mentally retarded children and adults. The Association became a member of the International League of Societies for Persons With Mental Handicap in 1968, and has been extremely active in the League's partnership work in developing countries, in Bangladesh and in Africa.

The NFPU, with 10,000 members and 225 local associations, including groups of handicapped people, is an important influence in the development of public services for persons with mental handicap. With economic support from the state, the Association maintains a parent support service especially aimed at new parents, a service which is spreading throughout the country.

Samordningsrådet for frivillig arbeid
for psykisk utviklingshemmede
c/o Thorsrud, Åkershagan,
2312 Ottestad.

Council for Voluntary Work
for the Mentally Retarded

The Council was established in 1951 to coordinate the work of voluntary groups in building up the institutional care. It consists of representatives from many national humanitarian and health organizations and some professional societies. Its work was very important during the 1950s and '60s; since then the structure and focus has changed to an emphasis on public information and education.

PUBLICATIONS

År rett (Our Rights)
Akersgatan 47
0180 Oslo 1

Journal (since 1970) of Norsk Forbund
for psykisk utviklingshemmede

Rapport (Report)
Åse Staude, editor
Homans vei 18,
1310 Blommenholm

Journal (since 1954) of Samordningsrådet
for frivillig arbeid for
psykiski utviklingshemmede

A detailed Directory is issued annually by the Health Directorate listing by regions (14) the numbers of residents in each institution, state and private, in care homes and in family care, as well as in day care and sheltered workshops.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Most early case finding takes place through maternity hospitals, general practitioners or public health nurses in the 1400 health centers for mothers and children, scattered throughout the country. They provide infant care and, in most cases, check-up services for small children. Pediatric, neurological and psychiatric departments of larger hospitals are used for secondary assessments.

In February 1985, a special center for the diagnosis and treatment of children with serious brain damage, including severe mental retardation, was started at the state hospital in Oslo. Frambu is a unique center near Oslo where families or individuals with disabilities come for counseling and help, usually in small groups of like disability, for a weekend or longer. Contacts and support come from the various special interest groups of parents and professionals.

Education - The first special schools for retarded children were started in 1881; some still function although the principle of integration is an accepted policy. Children with handicaps must be accepted in kindergarten programs and may be given special education training if necessary. Compulsory and appropriate elementary education for all children, including those with handicaps, has been since 1975 the responsibility of the (454) local authorities. Handicapped children may receive educational programs before the usual school starting age of 7 years and after 16 years when necessary. The counties, which provide the Upper Secondary Schools (17-21 years), shall give preference to handicapped youth. In addition, persons with mental retardation may receive educational services under the Adult Education Act. As a result of these new laws, between 1975 and 1985 the number of children in institutional care has been significantly reduced.

Regional Institutional Care - The institutional system was mainly built up by private organizations with support from the state and the counties. In 1970 the Hospital Act gave full responsibility to the counties to plan, establish and run the necessary health institutions including those for persons with mental retardation. The plan included central institutions, smaller residential units, day institutions and private/family care. In quite a few areas two or more counties have joined together to provide services, making a total of 14 regions.

In 1985 there were some 270 institutions serving about 8,000 persons, with 400 living in private/family care. The state reimburses 50 percent of the costs. According to the regulations issued by the Ministry of Social Affairs, every county/region shall have a professional team to insure that each resident receives appropriate treatment; the team is responsible for all admissions and discharges. Each county also has an inspection team which monitors all services, particularly with regard to the rights of each retarded individual; this team consists of a lawyer, a social worker and a parent, plus their alternates.

Community Services - Since 1976 more emphasis has been placed on establishing services within the community, especially helping children or adults living with their parents, or moving into smaller group homes. A 1982 law (effective 1984) has given the local communities the responsibility of providing the needed ordinary health and social services for all residents, i.e. all "first line services", while special services are a county obligation. There are still questions in some areas about how this is to be resolved in some cases of persons with mental retardation.

National Insurance - For all citizens, the National Insurance pays for all medical services, ambulant and hospital, rehabilitation services, disability and other social benefits such as child allowances, maternity support and old age pensions. Similar insurance provisions provide support to the unemployed, and to single persons and families in need of social assistance. In Norway all of these services are considered important to promote the common welfare. In addition, persons with mental retardation may obtain various forms of financial support from the national insurance program depending on individual need for such support, thus gradually limiting the dependence on the institutional system.

Work Training and Employment - Norway has a long history of providing such services to handicapped people but persons with mental handicap have been one of the last groups included. Still today, only a small percentage of people in sheltered workshops and vocational training centers under the administration of the Directorate of Labour have mental retardation. Some sheltered workshops at institutions are now being transferred to the Directorate of Labour at the request of Parliament.

Research - Norway's most significant contribution to mental retardation research has been the work of Dr. Asbjørn Følling, discoverer of PKU (phenylketonuria or Følling's disease) in 1934. Today both medical and educational research are being conducted, and there is growing interest; funds are scarce although the Council for Voluntary Work for the Mentally Retarded has provided support for several projects. Recently, the state has supported research to identify the real needs of persons within the county institutional systems as well as in the communities, investigations which are of great importance in planning services.

Personnel Training - Lack of enough specialized personnel is an acute problem. A diploma course for special education teachers includes basic teaching emphasizing the child rather than the handicap, and a second year of specialization. Three-year training courses for care personnel are offered in 7 schools. Originally this was for work in institutions but the curriculum has been changed to prepare staff for work in community programs. Nurse training is three years and may be followed by an advanced course in psychiatric nursing. Short courses in mental retardation are offered in such disciplines as medicine, psychology, education, social work, and for directors of smaller residential homes.

Recreation - Recently physical education programs have been intensified, especially in the institutions. The Department for Youth and Sport in the Ministry of Culture and Science has been especially interested in physical training and sports for residents of institutions and has also provided financial support for various sports facilities. It has become quite usual for people with mental handicaps to travel to the Mediterranean countries on vacation. A private organization has established a holiday resort in Spain especially for people with mental retardation, but there are in fact rarely problems with ordinary vacation travel arrangements.

OTHER INFORMATION FOR VISITORS

Assistance in making plans to visit can be requested from the Health Directorate and the NFPU.

School Holidays - The summer vacation period is from mid-June to mid-August.

PAKISTAN

The Islamic republic of Pakistan has a population of 97 million (1987) and an area of 310,413 square miles, including areas of outstanding scenic beauty and archaeological interest. Its political format has been variable, with periods of martial law and experiments with parliamentary democracy. Relations with India have been unstable since Partition and Independence in 1947. Pakistan is accommodating 3 million refugees from neighboring Afghanistan. The country is multi-ethnic and multi-linguistic. Urdu is the official language, but English is spoken by the educated classes and is commonly used in Government business. The population is 95% Muslim, with Christian, Hindu and Sikh minorities.

Some 30% of the population are urban dwellers. Six cities exceed 1 million, with Karachi (8m.) and Lahore (3m.) the largest. Considerable progress has been made in adding an industrial base to a largely agricultural economy, but the rate of annual population increase (3%) has eaten into the material prosperity that might have been expected. Per capita GNP is about $380. Infant mortality rate 120 per thousand; school enrollment about 65% (boys), 30% (girls); adult literacy rate is 26%.

GOVERNMENT AGENCIES

Educational Aspects of Mental Retardation

Directorate-General of Special Education
Division of Special Education and Social Welfare
Ministry of Health, Special Education and Social Welfare
Government of Pakistan, Islamabad

Medical Aspects of Mental Retardation

Division of Health
Ministry of Health, Special Education and Social Welfare
Government of Pakistan, Islamabad

Responsible for Non-Governmental Organizations (NGOs)

National Council of Social Welfare
Manzoer Plaza, East Blue Area, Islamabad

VOLUNTARY AGENCIES

With Primary Concern in Mental Retardation

No voluntary agency yet has more than Province-wide scope. There are moves towards forming a National Federation of the existing organizations, among which the more prominent are:

Association for Children with
Emotional and Learning Problems
c/o Dep. of Neuro-Psychiatry,
Jinah Postgraduate Medical Centre
Karachi * 1982

Association for Retarded Children
166-E Block 3, P.E.C.H.S.
Karachi * 1982

Frontier Association for the
Mentally Handicapped
14-A Nasir Mansion, Railway Road
Peshawar, NWFP * 1980

Society for Children in Need of
Special Attention - SCINOSA
20 Oriental Chambers, Altaf Hussain Rd.
Karachi * 1968

Society for Mentally and Emotionally
Handicapped Children
P.O. Box 621, G.P.O. Lahore
Punjab

West Pakistan Society for Welfare of
Mentally Retarded Children
16-S, Gulberg II
Lahore

* Affiliate members of the International League of Societies for Persons with Mental Handicap.

Including Mental Retardation

Institute of Social Sciences
14 / E-iv Model Town
Lahore

Pakistan Psychological Association
P.O. Box 1511
Islamabad

Pakistan Psychiatric Society
c/o Dept. of Psychiatry
Khyber Hospital
Peshawar

RESEARCH

National Institute of Special Education
c/o Directorate-general of Special
Education
Islamabad

National Institute of Psychology
P.O. Box 1511, Islamabad

National Council of Social Welfare
Manzoor Plaza, East Blue Area
Islamabad

Pakistan Medical Research Council
Islamabad

PUBLICATIONS

"Formative Years: Bulletin of Child Mental Health", P.O. Box 621, GOP Lahore

Mental Health Centre, Peshawar, also regularly publishes manuals, curriculum materials, public education pamphlets and other papers in the mental handicap field.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Counselling and Education - In 1978 there were 6 special schools; in 1987 more than 40 educational and training facilities exist for the mentally handicapped, and the pool of skills, experience and public awareness has grown steadily. Mental handicap in Pakistan is in transit from the medical to the education/social welfare field. Pediatricians and psychiatrists used to be the first and last professional points of contact for families: they are now able to refer onwards to educational facilities, a shift of emphasis that is enlarging both the rehabilitative potentials and the inter-disciplinary tensions.

Personnel Training - Some personnel with backgrounds in pediatrics, psychology, child psychiatry or social work have taken training abroad in modern approaches to the mentally handicapped and are now informally training special school staff on-the-job. Formal Government-sponsored training started in 1986, and will use distance learning methods from 1988.

Residential and Community Services - Some large, segregated institutions with residential facilities have recently been constructed on the basis of earlier plans and attitudes, while more recent trends of thought have resulted in integrated schooling of handicapped children in Sind Province and some community-directed rehabilitation developments in Punjab and the North West Frontier. One self-advocacy group exists, in Karachi.

Planning and Present Trends - A national survey of mental handicap NGOs indicates that plans and priorities centred on extending existing institutions and counselling services; and discovering professional and financial resources to achieve this goal. Respondents identified lack of professional skills, negative public attitudes and lack of coordinated efforts among the major obstacles. Items such as self-advocacy, leisure time, sports, legislation, architectural design, profound mental handicap, education for personal relationships, were hardly on the agenda. Yet the exposure to international currents of thought is considerable, and these more sophisticated demands are beginning to compete for the limited available resources of time and personnel.

OTHER INFORMATION FOR VISITORS

Professional visits may be arranged with the Ministry of Health, Special Education and Social Welfare, together with the Pakistan Tourist Development Corporation, Government of Pakistan, Islamabad.

School Holidays - three months ranging from May to September, depending on the part of the country. Institutions are normally closed on Fridays each week.

PARAGUAY

The Republic of Paraguay is a semi-tropical country bounded by Argentina, Bolivia and Brazil. The capital, Asunción, has 530,000 inhabitants, 14% of the total population, estimated (1987) at 4.3 million; 42% live in urban areas.

Official languages are Spanish and Guarani, both spoken currently by most of the population. Primary education is bilingual; the literacy rate has increased to 84%. 41% of the population in 1982 was under 14 years of age; the growth rate is 2.5% and life expectancy is 65 years. There is a social insurance system for employed persons and their families, including medical benefits, administered by the Social Insurance Institute of the Ministry of Health and Public Welfare. The institute has its own hospital and outpatient services.

Education is free and obligatory from 7 to 14 years of age, and includes exceptional children (those with special needs). Great attention has been given to development of public education in the recent decades; during 1983, 3,690 primary schools, 658 secondary schools and two universities were functioning. The first special school for children with mental retardation was created in 1956. Others have followed successively, public and private, mainly during the last 15 years.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Salud Pública y Bienestar Social Departamento de Salud Mental Brasil y Pettirossi Asunción	Ministry of Public Health and Social Welfare Mental Health Department
Ministerio de Justicia y Trabajo Asunción	Ministry of Justice and Labor
Ministerio de Educación y Culto Chile 860, Asunción	Ministry of Education and Culture
Departamento de Educación Especial 15 de Agosto 715 y E.V. Haedo Asunción	Department of Special Education
Instituto Nacional de Protección a Personas Excepcionales (INPRO) Yeruti y 1a, Municipio de Fernando de la Mora (or c/o Ministry of Education)	National Institute for the Protection of Exceptional Persons

Established in 1979 as an official agency under the Ministry of Education, INPRO's goals are to protect and promote the interests of handicapped people and to work towards their acceptance in the community in a role equivalent to that of their non-handicapped peers. Between January 1981 and June 1985, 2,446 "exceptional" persons were registered and provided with diagnostic and treatment services; of these 446 (18%) were children or adults with mental retardation.

VOLUNTARY ORGANIZATIONS

Asociación de Padres y Amigos de Deficientes Mentales (APADEM)	Association of Parents and Friends of the Mentally Deficient

Ayoles esq. Benjamín Constant
Casilla de Correos No. 467
Asunción

Founded in 1979, the Association became a member of the International League of Societies for Persons with Mental Handicap in 1982. It is in relationship with similar groups in the interior of the country, and works closely with the Instituto de Rehabilitación para Personas con Impedimentos Mentales y Físicos (Institute for the Rehabilitation of Mentally and Physically Handicapped People). Assistance is provided through a multidisciplinary team on the basis of the individuals' need; vocational training and also a sheltered workshop is available, plus two homes for severely mentally retarded people without stable families (Address: Cacique Lambaré casi Fernando de la Mora).

Other

Asociación Nacional de Asistencia Integral al Mongólico (ANAIM)
Avda. Fernando de la Mora y Taruma, Asunción

RESEARCH

Departamento de Educación Especial
Instituto Nacional de Protección a Personas Excepcionales

BRIEF NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - Casefinding is generally dependent on referral by parents, teachers, doctors or social workers, and, most frequently, because of the child's difficulties in school. Diagnostic and assessment services are provided by the Institutes noted above or in the interior possibly by a regional health center. Consultation to parents is an important part of the work of the parent associations, and the teaching staff of schools.

Education - In 1985 there were 8 special schools for children with mental retardation, two private and six official. Five were in Asunción, the other three in Concepción, Padre Juan Caballero and Tobati. There are also special classes functioning in Asunción and in 18 localities in the interior of the country; all have direct relationship with the Department of Special Education, Ministry of Education. There are in general three types of programs: for those individuals who are able to be trained, emphasis is on comprehensive development and personality formation, enabling children to function in the family and in the social environment according to their limitations and possibilities. For children and youth able to learn, the goal is to provide an integral academic, social and technical education towards integration in society and active, useful participation in the technical world. Other programs are based on an integrated teaching model, grouping children with different functioning levels, using both individualized and group teaching strategies. (For example, Escuela Integrada Alegría, Padre Pucheau No. 440, Asunción; started in the early 1980s.)

Work training and employment - Both INPRO and APADEM offer work training and assistance with job finding; APADEM supports a sheltered workshop. In 1984 the Department of Special Education opened a Protected Workshop where people with mental retardation, deafness and blindness are employed in productive work benefiting their country as well as themselves. It is located at Montevideo 840 near Humaitá.

Personnel training - For a number of years teachers were trained abroad, in Uruguay, Argentina, Spain, or though the Partners of the Americas of Kansas, USA. The German speaking villages in the Chaco region have had consultation and assistance in teacher training from the North American Mennonite Mental Health Services. At present, however, the Ministry of Education and Culture is providing training for human resource needs in the fields of mental retardation and deafness, with funding through INPRO. Courses lasting two years have been developed in the Instituto Superior de Educación; by 1985, 108 professionals had graduated.

OTHER INFORMATION FOR VISITORS

Requests may be directed to INPRO and to APADEM.

School holidays - The summer vacation lasts through December to mid-March; Easter and other church holidays and a one or two-week winter vacation in July.

THE PHILIPPINES

The Republic of Philippines, a part of the Malay Archipelago, is composed of 7,107 islands with a population of 54 million. There are 87 spoken native languages; "Pilipino" is the national language, with English and Spanish also considered official languages. The estimated literacy rate is 83%, one of the highest in Asia.

The educational system consists of a six-year elementary, a four-year secondary and a minimum of four-year college education. Elementary education is compulsory and in the public school it is free as is public secondary education in some cities and in the rural "Barangay High Schools." The medium of instruction in the elementary level is both Pilipino and English while English is largely used in the secondary and collegiate levels.

GOVERNMENTAL AGENCIES WITH RESPONSIBILITY FOR MENTAL RETARDATION

	Areas of Concern
Ministry of Education, Culture and Sports Special Education Division Bureau of Elementary Education Palacio del Gobernador Intramuros, Manila	In charge of education of all exceptional children (Includes all Special classes and Special Education Centers)
National Commission Concerning Disabled Persons Philsucom Building North Avenue Quezon City	Since 1978, provides direction, coordination and supervision to all agencies and organizations engaged in prevention and rehabilitation of disabled persons.
Council for the Welfare of Children S-365 PICC Roxas Boulevard Manila, Philippines	Coordinates and conducts programs for the welfare of children and youth
Child and Youth Research Center 940 Quezon Boulevard Ext. Quezon City	Conducts and coordinates research in child-youth development
Special Education Department College of Education University of the Philippines Diliman, Quezon City	Teacher-training
Ministry of Social Services and Development Bureau of Child and Youth Welfare MSSD Building Quezon City	
Elsie Gaches Village Alabang, Metro Manila	Residential Institution for all types of retarded children and adults

Nayon Ng Kabataan
Manila International Airport Rd.
Pasay City

Residential and day care center for children who are abandoned, mentally retarded or have severe behavior problems

Reception and Study Center
for Children and Youth
Epifanio de los Santos Avenue
Quezon City

Serves abandoned, retarded children (0-6)

VOLUNTARY ORGANIZATION CONCERNED WITH MENTAL RETARDATION

Philippine Association for the Retarded, Inc. (PAR)
c/o Norfil - Foundation, Inc.
Room A 301/303, BEN LOR Building
1184 Quezon Ave., Quezon City

This organization was established in 1973 and hosted the First Asian Conference on Mental Retardation, supported by UNESCO and other governmental and non-governmental agencies. Since 1976, an affiliate member of the International League of Societies for the Mentally Handicapped; holds full membership in The Asian Federation for the Mentally Retarded (AFMR).

OTHER ORGANIZATIONS WHICH INCLUDE SERVICES TO PERSONS WITH RETARDATION

Philippine Foundation for
the Rehabilitation of the Disabled
c/o Lung Center of the Philippines
Quezon Avenue, Quezon City

Maternal and Child Health
Association of the Philippines
c/o Children's Medical Center
11 Benawe St., Quezon City

Parent Council for Exceptional
Children
c/o Manila Guidance Testing Center
P. Gomez Elementary School Compound
P. Guevarra St., Sta. Cruz, Manila

Philippine Mental Health
Association
East Avenue, Quezon City

Philippine Pediatric Society
32 Misamis St., Quezon City

Special Education Teachers
Association of Manila c/o
Manila Guidance Testing Center
P. Gomez Elementary School
Sta. Cruz, Manila

PRIVATE EDUCATIONAL INSTITUTIONS

Elks Cerebral Palsy Clinic
Dao St. Makati, Metro Manila

St. Joseph of Cupertino School
Mangyan Road, Loyalo Heights
Quezon City

The Learning Center
4566 Quintos Cor. Molina Sts.
Makati, Metro Manila

St. Martin de Porres for
Retarded Children
722 Tres de Abril St.
Labangon, Cebu City

Madonna Special School
c/o Caritas Manila
Jesus St., Pandacan, Manila

Sunshine Center
Elizabeth Pond, Cebu City

St. Anne Special School
13 Catleya St. Mindanao Subd.
Project 6, Quezon City

RESEARCH

Governmental agencies which include mental retardation studies are: The Ministry of Education, Culture and Sports; The Child and Youth Research Center; The National Commission Concerning Disabled Persons and The Council for the Welfare of Children. Other studies are carried out by the voluntary associations.

PUBLICATIONS

Reports and publications on services for the mentally retarded are included in school papers and sometimes in major dailies.

Modern Teacher, Philippine Journal of Education	P.O. Box 1576 Manila

BRIEF NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Parent Education - A system of identification procedure through referrals from teachers, general practitioners, community leaders and parents is done in both private and public schools. Diagnostic centers are available in 6 major cities. Continuing and systematic parent education and public information programs are being conducted by the schools to evolve a viable partnership between parents and professionals for the education and welfare of children and to harness community support for program development.

Education - The Ministry of Education, Culture and Sports offers special education programs to mildly and moderately retarded children in the special classes organized within the regular elementary schools throughout the country. Moreover, there are 34 public special education centers catering to the educational needs of all types of exceptional children. Severely mentally retarded children whose parents can afford it are enrolled in private special schools mostly found in metropolitan Manila. Some centers have special, pre-school facilities, however most children at this stage are usually integrated in the regular pre-school program.

Residential Care - The only long term residential institution for mentally retarded children and adults is the Elsie Gaches Village under the Ministry of Social Services and Development. This institution admits all types of mentally retarded clientele.

Work Training - Most of the special Education Centers and private special schools provide opportunities for vocational training in a Workshop and/or Work Center as an alternative scheme for secondary education. Adolescents are trained and equipped with marketable vocational skills to prepare them for integration in the community.

Parent Action - In addition to the Parent Council of the Manila guidance Center, parent-teacher associations exist in many schools, including strong voices in the private schools listed above. Although parents were among the leading activists in the founding of the PAR, it seems at present to have become a professional association primarily of educators.

Personnel Training - Most special education teachers are technically trained to handle a specific area of exceptionality. However a viable and continuing staff development program including in-service education, conferences, seminars, demonstrations and observation tours is conducted by the Ministry through the schools to further enhance the competencies of the teachers and update them with recent trends in the field. Scholarship programs are likewise available in the University of the Philippines, a joint and collaborative project of the University, the Ministry of Education and the National Commission concerning Disabled Persons. Foreign-supported study grants and training are available in limited numbers through Rotary International, The Colombo Plan and the Japan International Coordinating Agency.

Other Information for Visitors

Assistance in planning visits can be requested from:

Ministry of Education and Culture
Special Education Division

Philippine Association for the
Retarded

School Vacations

Summer vacation - April and May; Christmas vacation - 3rd week of December to 1st week of January. Legal holidays - January 1st, May 1st, June 12, December 25 and 30.

POLAND

Poland's population is over 37 million, approximately 96% ethnically homogeneous and 60% urban dwellers. The country has 49 large administrative areas, voivodships, divided into communes. Education is free and compulsory from ages 7 to 15. A broad social security and insurance system provides free health care, disability and old age pensions, sickness and family allowances.

Mental retardation statistics in Poland are similar to those in other European countries. The Ministry of Education, based on data from registration of children of pre-school age, estimates the proportion of children ineligible for normal school because of inadequate mental development as between 2 and 2.4%. Another estimate obtained through a field survey showed a proportion of approximately 0.4% of the children with IQ below 50 in the age group 7 to 13.

The Ministry of Education and the Ministry of Health and Social Welfare are responsible for all services, except that most gainful employment of mentally retarded adults is part of the activity of the Union of Invalids Cooperatives.

During the last years significant progress in the field of mental retardation has taken place and is reflected in the development of services, including early intervention and parent education activities.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministerstwo Zdrowia i Opieki Społecznej Miodowa 15, Warsaw	Ministry of Health and Social Welfare
Departament Profilaktyki, Lecznictwa i Rehabilitacji	Department of Medical Prevention, Treatment and Rehabilitation Responsible for diagnosis, treatment, and rehabilitation.
Departament Pomocy Społecznej	Department of Social Welfare Responsible for Institutional care.
Ministerstwo Oswiaty i Wychowania Aleja I Armii WP, Warsaw	Ministry of Education
Departament Kszatałcenia Specjalnego	Department of Special Education Responsible for day and boarding school education.

VOLUNTARY ORGANIZATIONS PRIMARILY CONCERNED WITH MENTAL RETARDATION

Komitet Pomocy Osobom z Uposledzeniem Umysłowym przy Towarzystwie Przyjaciół Dzieci /TPD/ ul. Jasna 24/26, 009 50 Warsaw	Committee for Persons with Mental Handicap, at the Association of Friends of Children (TPD)

In 1963 the Committee of Help to Special Care Children (now Committee for Persons with Mental Handicap) was organized as an autonomous body within the long established Association of Friends of Children (TPD); it includes both parents and professionals. The Committee has become a more autonomous and national organization and now has 120 local chapters in voivodships and cities. It has initiated many measures aimed at development of services such as schools for moderately and severely retarded children, day centers, including centers for profoundly retarded, kindergartens, sheltered workshops, youth clubs, and summer camps, also "family rehabilitation camps." The role of the Committee in changing public attitudes, also on the part of professions, should be emphasized. Helping mentally retarded children and their families is now included in the programs of the whole TPD Association, which has chapters in every locality and membership of 1,000,000. The Committee has been a member of ILSMH since 1970.

Polski Zespół do Badan Naukowych nad Upośledzeniem Umysłowym przy ZG TPD ul. Jasna 26 - 009 50 Warsaw	Polish Group for the Scientific Study of Mental Deficiency at TPD (Association of Friends of Children)

The group organizes interdisciplinary symposia on mental retardation and promotes research. In 1970 it co-sponsored the 2nd Congress of the International Association for the Scientific Study of Mental Deficiency in Warsaw together with the Polish League for Rehabilitation of the Disabled.

ORGANIZATIONS WHICH INCLUDE CONCERN FOR PEOPLE WITH MENTAL RETARDATION

Zwlazek Spółdzielni Inwalidów ul. Gałcynskiego 4-1 Warsaw	Union of Invalids Cooperatives

The Invalids Cooperatives are an integral part of the Polish cooperative movement. They are voluntary, self-governing bodies providing vocational rehabilitation and gainful employment for handicapped persons. Their economic activities form part of the national economic plan. Special economic privileges and financial provisions enable them to compete in the open market and to carry out their economic and social programs. About 190,000 disabled people are employed in the cooperatives which include many large factories, along with specialized therapeutic (sheltered) workshops.

Polskie Towarzystwo do Walki z Kalactwen ul. Partyzantów 10, Warsaw	Polish League for Rehabilitation of the Disabled

RESEARCH

Instytut Psychoneurologiczny Al. Sobieskiego 1/9, Warsaw	Psychoneurological Institute
Instytut Matki i Dziecka ul. Kasprzaka 17, Warsaw	Institute of Mother and Child Care
Zakład Badawczy Zwiazku Inwalidów Gałczynskiego 4, Warsaw	Research Center, Union of Invalids Cooperatives

Wyzsza Szkoła Pedagogiki Specjalnej im. Marii Grzegorzewskiej ul. Szczesliwicka 40, Warsaw	M. Grzegorzewska Higher School of Special Pedagogy (formerly Institute of Special Pedagogy)
Instytut Programów Szkolnych al. 1 Armii WP 25, Warsaw	Institute of School Programs
Instytut Kształcenia Nauczycieli al. 1 Armii WP 25, Warsaw	Institute of Continuing Education of Teachers

PUBLICATIONS

Neurologia i Neurochirurgia Polska	Polish Neurology and Neurosurgery, published bimonthly
Psychiatria Polska	Polish Psychiatry, bimonthly
Szkoła Specjalna	Special School, quarterly
Materiały Informacyjno-Dydaktyczne	Bulletin of the Committee for Persons with Mental Handicap

Directory - "Directory of psychiatric and neurological units, medico-educational and welfare institutions in Poland," published by the Psychoneurological Institute in a limited number of copies; not for sale.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - All children from birth to 14 years receive regular free health checks and prophylactic care (vaccinations, etc.); from birth to 3 years it is provided by the local mother and child centers. Health care of older children is the responsibility of the pre-school and school physicians.

The mental health services, mostly through the mental health centers, provide both consultation to other physicians and direct treatment of mentally retarded persons. The network of mental health centers developed rather quickly; there is, however, a shortage in pediatric neurologists and psychiatrists. The centers provide medical as well as psychological evaluation and therapy, including speech therapy and physiotherapy. The number of mental health centers was 60 in 1955 and 523 by 1982. A few neuropsychiatric children's sanatoria admit mentally retarded children for rehabilitation treatment.

Special programs for early detection of metabolic errors have been introduced by the Institute for Mother and Child Care, and screening of some 2,700,000 newborn babies for PKU has been performed. The PKU incidence is about 1:8,000. In detected cases special diet treatment is carried on under direct management of the Institute.

Education - Poland has a long-standing tradition of special education. As early as 1922 the Institute of Special Pedagogy was founded in Warsaw to prepare teachers for all types of special education. The special school network was limited to the educable level until the 1960's when, on the initiative of the parents' movement, some schools and classes were organized for moderately, and sometimes severely retarded children, known as "Schools of Life". Since 1966 they have been incorporated into the special school system of the Ministry of Education.

In 1983, 21 special preschools and 100 special groups in normal preschools cared for 900 children. 440 special schools and 394 classes in ordinary schools served about 68,000 children. In addition, 201 special vocational and 100 special classes in ordinary vocational schools accommodated approximately 20,000 students. There were 88 schools and 418 classes within schools for the mildly retarded, for 8,350 moderately and severely retarded children. Questions still exist concerning programs and methods of educating children with moderate and severe intellectual disabilities. Increased attention is being given to vocational preparation of all handicapped pupils.

Work Training and Employment - Most mildly retarded persons find employment on the open labor market, some, however, go to the workshops of the Union of Invalids Cooperatives. For moderately and severely retarded adults, programs have been developed for vocational training and work placement, mainly in the 62 sheltered workshops for retarded persons employed by the Invalids Cooperatives (12,000 spaces in 1983). Some pre-vocational training programs are provided by branches of the Committee for Persons with Mental Handicap.

Medical Care - In general, medical care is incorporated into the general network of medical services. The care of infants and small children is carried out by comprehensive pediatric services and facilities for women and children in the Mother and Child Centers administered by the Health and Social Welfare Sections of the Voivodship Administration. Attached to these centers are the School Medicine Dispensaries. Both call on the services of special consultants in the fields of pediatrics, gynecology, obstetrics and child surgery. At the local level the Mother and Child Inspectorates are part of the local health centers. Preventive public health measures initiated in the post-war years have brought a sharp decrease in maternal and infant mortality, and a great improvement in the general physical development of children. Crêches and nurseries for children of working mothers are under the public health system and the number of children attending them and the kindergartens of the public school system is comparatively large. The system of mental health services providing consultation and treatment to children and adults in outpatient clinics is still limited primarily to the larger population centers.

Residential Care - Institutions are run both by government and private organizations but the admission conditions are the same, and supervision is under the Department of Social Welfare. There are separate institutions for children (from 3-18 years) and for adults; certain adult institutions also include chronic mentally ill. Institutions have on the average 100 places. They are characterized by rather high standards of physical care, are mostly located far from big cities and not well staffed in professional personnel. There are long waiting lists. Serious problems are created by shortage of places in homes for adults. As the residents in the institutions for children grow up and the rate of discharge is rather limited, they gradually are being transformed into homes for children and young adults. In 1983 114 institutions for children provided 11,000 places; there were 10,500 adults in 94 institutions. In some of the institutions there are limited educational programs and some vocational rehabilitation.

Financial Assistance - All health services for children are supplied without charge; schooling is free. Within limits of their financial resources parents contribute to costs of residential care. Benefits under the social security system are particularly extensive in the area of health services. Since 1974 additional family allowances of 1750 zl. monthly (about $15) for the children who require special care, have been introduced. There is no age limit for this allowance. Since 1981 mothers of small retarded children are entitled to a 6 year education leave (in the low income group the mothers are paid during the first three years).

Recreation - The first programs initiated by the parents' groups were summer colonies for moderately and severely retarded children, and an increasing number are being provided every year, as well as special programs for "School of Life" children during the year (16,000 children by 1983). Less handicapped children participate in the many recreation programs organized throughout the country by TPD (Friends of Children). The local chapters of the Committee run youth clubs, sport clubs, music groups, etc. Summer vacation camps for young people employed in sheltered workshops are organized by Invalids Cooperatives. Recently TPD started special summer camps for profoundly retarded persons together with their families.

Research - At the State Institute of Mother and Child Care, and also at the Psychoneurological Institute significant epidemiological studies have been undertaken. The PKU screening and treatment program at the first named institute has resulted in considerable research related to similar efforts in other countries. In several centers social science research has been conducted on the impact of mental retardation on families. Extensive research is undertaken in several of the large rehabilitation centers located in or near the major cities. The Union of Invalids' Cooperatives has done significant research in vocational rehabilitation of mentally retarded workers.

Personnel Training - The problem of staffing in Poland, as in many countries, is of paramount importance. Although there are some 70,000 physicians, there is a very big need to train them in problems of mental retardation. There is still a shortage of nurses, psychologists, highly qualified pedagogues and teachers, as well as vocational instructors. Special education teachers must hold a master's degree in special education, granted by the Higher School of Special Pedagogy or by Education Faculties of the Universities and Higher Schools of Pedagogy (now offered in 9 universities). Teaching of children who are more severely retarded has become an integral part of the curriculum.

Planning - Coordination is needed at the interministerial level in order to unite the efforts of various agencies and organizations. Also needed are community services, e.g. day activity centers provided by the welfare department.

OTHER INFORMATION FOR VISITORS

Visits should be arranged through the Polish Travel Bureau "Orbis" 124, ul. Marszałkowska, Warsaw. Contact with agencies listed above will be of help in planning a specialized program.

School Holidays - The main holiday periods are from end of June - September 1; from December 22 to January 9, and February 3-15.

P O R T U G A L

The Republic of Portugal has a population of 10.3 million (1987 estimate) and Lisbon, its capital city, about 900,000; the population growth rate is 0.3%. 23% of the labor force is in agriculture; 35% in industry. Since 1933 Portugal has had a social and health insurance system originally developed for employees in industry and commerce and now extended to all workers. Family allowances were introduced in 1942. In 1986 Portugal became a member of the European Economic Community.

Education is compulsory for a period of six years, divided into 4 years of primary and 2 years of preparatory school. Pupils may then choose to attend a secondary school for the remaining 6 years of public instruction. This system was developed as a result of the new Constitution of 1976 which provided for free universal and compulsory education for all children.

Special education activities originally centered in the schools for the blind and deaf opened in the beginning of the past century, and were under the Ministry of Welfare. By the 1960s some "educable" mildly retarded children were accepted in special classes in regular schools in the cities but others were either not in school or in private schools run by individuals or parent groups, with funding and supervision from the Ministry of Health and Welfare (now Social Affairs). In 1979 a Special Education Law provided the foundation for integration of children with handicaps in regular public schools, with responsibility for their education fixed solely within the Ministry of Education. This is gradually being implemented, with certain supports still coming from the Ministry for Social Affairs. An innovative grass roots development is the growth of Cooperative Programs for the Mentally Retarded, an initiative of parents and professionals who have started integrated school and pre-vocational programs in regular schools throughout the country side, known as CERCIs.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Educação Av. 24 de Julho 138 1399 Lisbon - CODEX	Ministry of Education
Direcção-geral do Ensino Basico e Secundário	Department of Basic and Secondary Education
Divisao do Ensino Especial	Division of Special Education
Ministerio da Assistencia Social Lisbon	Ministry of Social Affairs
Direcção-geral da Saúde	Department of Health
Direcção-geral da Segurança Social	Department of Social Security
Ministerio da Trabajo e Segurança Lisbon	Ministry of Labor

Coordinating Agency:

Secretariado Nacional de Rehabilitação Ave. Conde Valbom 63, 2°, 1000 Lisbon	National Secretariat for Rehabilitation

Responsible for coordinating programs and services across the various national agencies which are responsible for serving persons with disabilities. Serves as a clearing house for policy development, interagency agreements, new initiatives and dissemination of information.

VOLUNTARY ORGANIZATIONS

Professional:

Associçao Portuguesa de Deficientes (APD) Largo do Rato, Lisbon	Portuguese Association for Deficient People
Pro-Federação das Cooperativas de Ensino Especial Bairro de Sta. Barbara 2830 Barreiro	Federation of Special Education Cooperatives (Teachers and Parents)

Citizen:

Associação Partuguesa de Pais e Amigos do Cidadao Deficiente Mental (APPACDM) Pç.de Londres, N°. 9-40 Esq. 1000 Lisbon	Portuguese Association of Parents and Friends of Mentally Handicapped Citizens

The Association was begun in 1962 by a group of mothers of children with Down's syndrome. Its goals were widened and it was accepted in 1964 as a member of the International League of Societies for Persons with Mental Handicap; it has affiliated branches in various parts of the country. APPACDM supervises a number of day schools and sheltered workshops.

Associação Portuguesa para Proteçao aos Deficientes Autistas R. de Sonqueira 212, 4c 1200 Lisbon	Portuguese Association for Deficient Persons with Autism

Other organizations which include mental retardation:

Instituto de Assistência Psiquiatra
Instituto de Asistência aos Menores
Santa Casa da Misericordia de Lisboa

RESEARCH

Secretariado Nacional de Rehabilitação Ave. Conde Valbom 63, 2°, 1000 Lisbon	National Secretariat for Rehabilitation

Centro de Observação e Orientação
Médico-Pedagógico
Rua de Santana à Lapa 5
1200 Lisbon

Center for Medico-Pedagogic
Observation and Counselling

Studies are also carried on within the Ministries of Education and Social Affairs, and by the long established

Instituto António Aurélio da Costa Ferreira
Tr. das Terras de Sant'Anna 15, Lisbon

PUBLICATIONS

Margem - Centro de Educação Especial de Lisboa
Avenida Almirante Reis 133, 1100 Lisboa

A Criança Portuguesa, Instituto António Aurélio da Costa Ferreira

Boletin - and other publications of APPACDM

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - There is no legal obligation to report cases of handicap, nor any specific case finding system. The Centro de Observação e Orientação Médico-Pedagógico in Lisbon and also the Instituto António Aurélio de Costa Ferreira serve as observation, diagnostic and consultation centers to which children with special needs are brought by their families or sent by school, public assistance services, child welfare, pediatric and psychiatric clinics. They are supported by the Department of Social Security which also supports three centers for diagnosis and treatment of children with cerebral palsy (Lisbon, Proto and Coimbra). APPACDM and its branches also provide multidisciplinary evaluation and consultation, particularly for parents of moderately and severely retarded children.

Education - The Department of Basic and Secondary Education is responsible for developing a system of integrated education throughout the country. While it provides special schools with salaries for teachers and specialized personnel (such as speech and physical therapists), its main efforts support "integrated education" through the provision of resource teachers and regional teams with specialized expertise in categorical handicapping conditions. Resource teachers and clinical team members work with handicapped pupils in regular classrooms and provide material, support and training to the regular classroom teachers to facilitate the full integration of children with handicaps.

The first years of the new legislation the majority of handicapped children in integrated classes were those with visual and hearing impairments or other physical disabilities. Only about 18% of the children with mental handicap were in regular classrooms, most of them being in private special schools run by parents or cooperatives (although the CERCI classes may be located in a public school).

Work training and employment - The responsibility to provide vocational training and employment services for disabled and able-bodied citizens over the age of 16 belongs to the Ministry of Labor and Security which created, after 1979 legislation, an Institute of Vocational Training and Employment to develop policies and programs. SERED (the Handicapped Persons' Rehabilitation and Employment Service) within the Institute is responsible for ensuring training and employment opportunities. In theory all services are open to disabled persons; in practice specialized training centers, workshops and work activity centers have been developed for persons with mental handicaps, a few operated directly by the Institute, but most by private associations and cooperatives. The Model Vocational Rehabilitation Center of Alcoitão, planned to facilitate the integration of disabled persons into the generic service system, serves only physically handicapped people at present.

In 1983 about 155 pre-vocational programs for young people between 12 and 20 years were being supported by the Ministry of Education and the Ministry of Labor, primarily designed for pupils in special day and residential schools, most of which were operated by parent associations and cooperatives serving mentally handicapped youth.

Residential care was available for a limited number of children and young people in private residential schools, support coming from the Departments of Health and Social Security. Mentally handicapped adults who could no longer remain at home were typically sent to institutions serving the mentally ill.

Recreation - APPACDM has organized sport festivals and summer camping. A youth group affiliated with the Association assists.

Personnel training - One year courses for teachers of the mentally retarded are held by the Instituto António Aurélio da Costa Ferreira for a limited number of participants who have primary teacher qualifications or a university degree. This diploma is necessary for teachers of special classes in the ordinary schools. No training is necessary for supervisors (child care workers) in residential schools and homes.

Since the 1979 legislation the Division of Special Education has been responsible for intensive in-service training courses for teachers and other personnel involved in the education of children with disabilities. The Centres for Médico-Pedagogic Observation and Counselling (in cooperation with the Ministry for Social Affairs) also provide on-going training activities for special education teachers and other professionals throughout Portugal.

OTHER INFORMATION FOR VISITORS

Information can be requested from:
Secretariado Nacional de Rehabilitação
Av. Conde Valbom 63, 2°, Lisbon

Associação Portuguesa de Pais e Amigos de Cidadão Deficiente Mental
Pç.de Londres, No. 9-40, N° 9-40 Esq., 1000 Lisbon

School holidays - August to mid-September, two weeks for Easter and Christmas.

PUERTO RICO
(USA)

Puerto Rico has been voluntarily associated with the United States of America as a self-governing Commonwealth since 1952. It occupies a 3,421 sq. mile tropical island in the northeast end of the Caribbean Sea, with a population of 3,196,520 (1980). As U.S. citizens, people are eligible for federal social welfare and social security programs; they have a voice but no vote in federal affairs and do not pay federal taxes.

The official language is Spanish, although English is also widely spoken and is taught as a compulsory second language up to high school. The people are Roman Catholic (85%) and Protestant (10%), with many also believing in spiritualism.

Although the unemployment rate is generally high (over 12%), the Commonwealth on the whole has one of the highest standards of living in Latin America. Public education is free and compulsory at the elementary level, and about a third of the government budget goes to education; the literacy rate is at least 86%. Special education services for mentally retarded children were started in 1958.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Departamento de Salud	Department of Health
Secretaría Auxiliar de Salud Familiar y Medicina Preventiva Box 70184 San Juan, Puerto Rico 00936	Auxiliary Secretariat for Family Health and Preventive Medicine
Departamento de Instrucción Pública	Department of Public Instruction
Secretaría Auxiliar de Educación Especial Box 759 Hato Rey, Puerto Rico 00919	Auxiliary Secretariat of Special Education
Departamento de Servicios Sociales	Department of Social Services
Secretaría Auxiliar de Rehabilitación Vocacional	Auxiliary Secretariat of Vocational Rehabilitation
Secretaría Auxiliar de Servicios a la Familia Box 1118 Hato Rey, Puerto Rico 00919	Auxiliary Secretariat of Family Services
Oficina del Procurador para las Personas con Impedimentos Avenida Carlos Chardón #916 Hato Rey, Puerto Rico	Procurator Office for the Handicapped Persons

Program of Special Education (Teacher Training)
College of Education
University of Puerto Rico
Rio Piedras, Puerto Rico 00931

Corporation of Industries of Blind, Mentally Retarded and other Handicapped Persons
Box 8627
Santurce, Puerto Rico 00910

VOLUNTARY ORGANIZATIONS CONCERNED PRIMARY WITH MENTAL RETARDATION

Citizen

Asociación Pro Ciudadanos Retardados de Puerto Rico Box 1904 San Juan, Puerto Rico 00936	Puerto Rican Association for Retarded Citizens - PRARC Founded in 1958
Asociación Retardo Mental del Caribe Box 792 San German, Puerto Rico	Caribbean Association on Mental Retardation and other Developmental Disabilities

This organization has member societies throughout the Caribbean area. It was formally organized at the 2nd Caribbean Conference on Mental Retardation, sponsored by the PRARC and the Commonwealth of Puerto Rico in 1972 (see International Organizations section).

OTHER CONCERNED ORGANIZATIONS

Asociación Padres y Amigos del Centro Diagnóstico y Orientación para Niños Retardados Mentales (APACEDO) Santurce, Puerto Rico	Parents and Friends Association of the Diagnostic and Orientation Center for Mentally Retarded Children

Day care center offering evaluation, diagnosis and treatment to children with mental retardation and other disabilities.

Asociación de Padres Pro-Bienestar de Niños Impedidos, Inc. Apartado 21301 Río Piedras, Puerto Rico 00928	Parents Association for the Welfare of Handicapped Children, Inc.

This organization offers training to parents in all aspects of the care of handicapped children.

PUBLICATIONS

The PRARC publishes a directory of mental retardation services, "Directorio de Recursos para el Retardo Mental en Puerto Rico."

The Department of Health gathers statistical data on the prevalence (by age, sex, location and type) of mental and physical handicaps throughout Puerto Rico, published annually in the Vital Statistics.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Diagnosis and Assessment, Medical Care, Consultation to Parents - The Department of Health operates pediatric centers island-wide offering evaluation, diagnostic and treatment services and orientation to parents. In the San Juan Pediatric Hospital the Department of Health has an early stimulation program for infants identified as high risk.

Education, Work Training, Residential Care - Educational services for children of all levels of mental retardation are available in special classes in regular public schools and in two private residential settings. Although services are concentrated in the major population centers, all of the 8 regional school districts under the Department of Public Instruction have some rural classes. There are 3 private schools, the Instituto Psicopedagógico de Puerto Rico, started in 1949, the Fundación Gotay, and the Nilmer School, which have day and residential pupils.

Pre-vocational training and work training are generally available in the schools and also in vocational training centers. The Vocational Rehabilitation program provides placement and training through its five rehabilitation units for the retarded, its nine district offices and three rehabilitation centers.

Financial Assistance - Private schools usually receive some public subsidy. Puerto Rico is eligible for U.S. funds by means of Federal laws that protect persons who are developmentally disabled.

Recreation - The Fundación para Servicios de Niños Mentalmente Retardados (Santurce) operates sports, recreation and scouting programs. Public schools have recreation programs which may include visits to Disney World in Florida, camping and participation in the Special Olympics program.

Personnel Training - Special education teachers are trained at the College of Education of the University of Puerto Rico; psychology students receive additional in-service training, specifically including behavior modification. A number of seminars have been provided for teachers, parents and camp counselors. Beginning in 1975, a 2-year demonstration project in citizen advocacy training was offered to 40 persons from 20 municipalities, under sponsorship of the PRARC and the University of Puerto Rico's Graduate School of Social Work.

Planning - The Puerto Rican Developmental Disabilities Council (Edificio Caso, Oficina #901, Santurce, Puerto Rico 00908) is mandated to coordinate service delivery and stimulate additional services; it is funded by the U.S. Department of Health and Human Services.

Information for Visitors - may be obtained from the DD Council, PRARC, or other government agencies.

School Holidays - Christmas, Easter; no long summer vacation for children with special needs.

SAUDI ARABIA*

The Kingdom of Saudi Arabia occupies about 4/5 of the Arabian Peninsula; the population is about 14.8 million (1987 estimate). Riyadh, the capital, had 1.25 million people in 1980, Jeddah, the next largest city had 1 million.

The official language is Arabic; almost all Saudi Arabians are Bedouins and practice the Sunni Moslem religion. The west is covered by highlands and east by desert, and agriculture (dates, wheat, barley, etc.) is restricted to the highlands and scattered oases. Saudi Arabia has the world's greatest oil reserves and receives most of its income from that industry; the second most important source of income is that from the pilgrims to Mecca and Medina. The government's legitimacy is derived from the Koran and custom, and is headed by an hereditary king who exercises authority along with a Council of Ministers. Elementary and secondary education are free, but not compulsory.

The literacy rate is estimated at 52%. In 1975, there were three major universities and two technical colleges. Saudi Arabia is a welfare state (as developed under King Faisal) and services such as medical care are free, as are the various special institutes for the handicapped.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Directorate General of Special Education Ministry of Education Riyadh	This ministry has official responsibility for administration and technical supervision of the special institutes for retarded children
Ministry of Labor and Social Affairs Riyadh	Provides health, social and psychological services.
Ministry of Health Riyadh	Provides medical care and health services for persons with physical handicaps.

BRIEF DESCRIPTIVE NOTES ON PROGRAMS AREAS

Diagnosis and assessment, medical care, education and work training - Services are primarily based in Riyadh (although plans are underway to extend them to other cities) and are government operated. Riyadh has a central unit for health and social services, which includes a diagnostic and assessment team and personnel trained in mental health and guidance. There is also a unit for physiotherapy. The Directorate General of Special Education oversees the schools (Institutes) in Riyadh for retarded children, which include 27 special classes. These provide pre-school, elementary, vocational and physical education. They are supplied with special instructional materials by the Ministry of Education. Programs for parents of disabled children are available, as well as informational services directed toward the general public.

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* Partially updated.

Personnel training - Personnel are primarily educators in special schools. Many have been trained abroad on fellowships, but training for teachers of special education is now provided, as well as in-service training.

Other information for visitors - Requests for information may be made to the Directorate General of Special Education.

School holidays - June, July, August.

SINGAPORE

Singapore is a small island immediately south of the Malaysian peninsula; its population of 2.6 million is approximately 70% Chinese, 15% Malays, 7% Indians, Pakistanis, Sri Lankans and others. Long a British Crown Colony, Singapore became internally self-governing in 1959 and for two years was part of the Federation of Malaysia, becoming an independent republic in 1965. Malay is the national language but Chinese, English and Tamil are also official languages; English is the language of administration and is widely used in professional and business circles and schools. Health standards are high and the average life expectancy is 72 years. About 45% of the population is under 25 years of age.

Education is available at pre-school through university levels, and includes adult education as well as special education for handicapped children. Until 1960 there were no programs for intellectually disabled children or adults in the community. A limited number received care in the mental hospital, and the children's ward of the general hospital kept a registry of intellectually disabled children. With the assistance of the Rotary Club and Singapore Children's Society, a small class for moderately intellectually disabled children was established. This resulted in the founding in 1962 of the Singapore Association for Retarded Children, which has taken leadership in providing services. A special education unit was set up in the Ministry of Education in 1973 to assist schools in the training of handicapped children, including those with mild intellectual disabilities.

GOVERNMENT AGENCIES DEALING WITH INTELLECTUAL DISABILITY

Ministry of Health

Mental Deficiency Ward
Woodbridge Hospital
Singapore 1954

Institute of Health
Outram Road
Singapore 0316

Maternal and Child Health Section

Paediatric Unit
Singapore General Hospital
Outram Road, Singapore 0315

Developmental Assessment Centre
Singapore General Hospital
Outram Road, Singapore 0316

School Health Clinic

Ministry of Community Development
Pearl's Hill
Singapore 0316

Ministry of Education
Kay Siang Road
Singapore 1024

VOLUNTARY ORGANIZATIONS

Movement for the Intellectually Disabled of Singapore (MINDS)
844 Margaret Drive
Singapore 0314

MINDS, formerly known as the Singapore Association for Retarded Citizens (SARC), was founded in 1962 to provide educational, training and welfare services for moderately and severely intellectually disabled children.

It is affiliated with the International League of Societies for Persons with Mental Handicap and was a founder member of the Asian Federation for the Mentally Retarded. It is also a member of the International Association for the Scientific Study of Mental Deficiency.

In 1972, the Association organized the first regional conference in Asia on special education and the intellectually disabled, with participants from six other countries. To commemorate its 25th anniversary, the Association organized the 8th Asian Conference on Mental Retardation held in Singapore during November 1987.

In 1976, the Association sponsored the formation of an Association for Educationally Subnormal Children to take over the training of the mildly intellectually disabled children. Both the Associations have joined to form the Committee for the Promotion of Services for the Intellectually Disabled (COMPSIDS) to represent them at the international level on matters relating to the intellectually disabled.

Association for Educationally
Sub-Normal Children (AESN)
341 Clemenceau Avenue
Singapore 0922

COMPOSIDS
c/o Singapore Council of Social
Services
11 Penang Lane, Box 08-03
Singapore 0923

Other organizations which include services to the intellectually disabled:

Singapore Association for the Blind
51 Toa Payoh Rise
Singapore 1231

Ang Mo Ko Avenue Social
Service Centre
Block 228 #01-1326
Ang Mo Kio Avenue 3, Singapore 2056

Advisory Clinic for the Handicapped
Kim Keat Community Centre
1999 Toa Payoh Lorong 8, Singapore 1231

Singapore Paediatrics Society
c/o Medical Alumni Centre
College Road, Singapore 0316

Vocational Assessment and
Placement Centre
11 Penang Lane
Singapore 0923

Riding for Disabled Association
of Singapore
31 Yarwood Ave., Singapore 2158

Spastic Children's Association of
Singapore
25 Gilstead Road
Singapore 1130

BRIEF DESCRIPTION OF PROGRAMMES OFFERED BY MINDS

Early Intervention Programme for Infants and Children (MINDS) - MINDS initiated an Early Intervention Programme for Infants and Children (EIPIC) in October 1983. It provides intellectually disabled children under 3 years old an early start in attaining a solid foundation for the better development of skill acquisitions at higher levels; it also teaches and informs parents on various aspects of child care, including diet and nutrition.

Each child is assessed on the Development Assessment Scale (from 0-48 months), an age-related, sequential, criterion referenced test which enables teachers to design individual programmes for the children who are then placed in classes suitable to their developmental age and ability. Class activities include items for gross and fine motor development, cognitive development, infant stimulation, infant massage, sand and water play, development of communication skills, self help skills, especially in feeding. There is a special massage and exercise programme for infants under 12 months or older children who need it. This assists the development of kinesthesia, encouraging movement and a full range of motion, stimulating circulation and fostering mother-infant bonding.

Central to early intervention is parent training, as much of the stimulation and intervention activity with the infant must be carried out daily and consistently in the home. The IPIC teaches caregivers, mostly mothers and grandmothers to help the toddler develop his coordination so that he will be able to lead as independent a life as possible in later years.

Social Work Services - Professionally trained Social Workers handle all referrals to the Association from hospitals, schools, health services and clinics. In their first contact with the parents, the Social Workers not only introduce the Association and its facilities but also clarify the concept of mental retardation and its causes to allay unnecessary fears and anxieties. Counselling is provided to help the parents and families understand the problems and difficulties facing them and make the necessary social and emotional adjustments.

Home visits, referrals and liaison with other agencies are also made to enhance the functioning of the intellectually disabled person at home, in school and in society.

Psychological Services - Psychological Services at MINDS provide assessment, behavior management programmes at home and at school, an opportunity for research into the area of the mental retardation, counselling and/or information for parents and other persons involved, training programmes for parents and others in behavior management and other methods of training.

Schools - The Association maintains 3 schools, serving 778 children in 1985, from pre-school age to 18 years.

The objectives of the school are to help the children to be independent in daily living skills and equip them with social and basic vocational skills. The areas of skills training are in language and arithmetic, social skills, environmental science (e.g. knowing the neighborhood) manipulative and recreational skills, sensory awareness, house craft and management (cooking), physical education and games, music and movement, swimming, arts and crafts (free expression).

Work Training and Employment - The two sheltered workshops at Geylang and Jurong provide training for adults over 18 years. Contract work such as making of gift package boxes, folding of advertising pamphlets, assembly work of artificial flowers, ball point pens, are obtained from factories and offices. The income earned is given in total to the trainee/workers. Where possible, they are placed in open employment.

Residential Service - The Tampines Home (30-U Lorong Buangkok, Singapore 1954) caters for 58 young adult intellectually disabled persons. Admission is for persons from families with problems of a short term or long term nature. Length of stay for short term cases is up to a maximum of 6 months. Long term stay residents usually have no families or come from very deprived family background.

Research - University affiliated, biomedical and genetics research is being carried out under the direction of Dr. Kenneth Lyen, University Department of Paediatrics, Singapore General Hospital.

Personal Training - Only a few of the teachers employed in the Association's Centres have special training overseas.

In 1984, the Ministry of Education started to organize a Certificate in Special Education course conducted by the Institute of Education over a period of 3 years (part time).

In-service courses are held for the staff, members, parents and volunteers. A seminar "Towards Better Services for the Intellectually Disabled" was held on August 25, 1985 with 250 local participants. Visits by educational consultants from overseas have also been arranged.

OTHER INFORMATION FOR VISITORS

Those interested to visit the Association are requested to contact the Administrative Secretary, Movement for the Intellectually Disabled of Singapore (MINDS) at 844 Margaret Drive, Singapore 0314.

School Holidays - occur from the middle to end of April (2 weeks); the last 3 weeks of August; the end of November to the beginning of January (6 weeks).

SOUTH AFRICA

The Republic of South Africa has a population of 24 million divided into 16 million Blacks, 4,5 million Whites, 2,5 million Colored and 1 million Asians. Although a policy of racial separation is being only very gradually relaxed, laws and policies concerning separate residential areas, influx control, migratory labour, separate schools and separate hospitals still apply (1985).

Primary education is compulsory for all, but secondary education is only compulsory for Whites. There are 16 universities of which 10 are intended for Whites only. Limited admission of students of other racial groups is, however, now permitted. Official languages are Afrikaans and English. Persons who are profoundly and severely retarded are considered a health responsibility, moderately and mildly retarded children an educational responsibility and the moderately retarded adult a welfare responsibility. As each racial group is the responsibility of a specific government administration, this results in a large number of government departments having a responsibility in the field of mental retardation.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Department of Education and Culture
House of Assembly
Private Bag x122, Pretoria, 0001
(Moderately retarded White children)

Department of Education and Culture
House of Representatives
Private Bag x9008, Cape Town, 8000
(Moderately retarded Coloured children)

Department of Co-operation and Development
P.O. Box 384
Pretoria, 0001
(Moderately retarded Black adults)

Department of Health Services and Welfare
House of Representatives
Private Bag 9058, Cape Town, 8000
(Moderately retarded Coloured adults and severely and profoundly retarded Coloured children and adults)

Department of Education and Culture
House of Delegates
Private Bag x45323, Durban, 4000
(Moderately retarded Asian children)

Department of Education and Training
Private Bag x212, Pretoria, 0001
(Moderately retarded Black children)

Department of Health Services and Welfare
House of Assembly
Private Bag x723, Pretoria, 0001
(Moderately retarded White adults and severely and profoundly retarded White children and adults)

Department of Health Services and Welfare
House of Delegates
Private Bag x54330, Durban, 4000
(Moderately retarded Asian adults and severely and profoundly retarded Asian children and adults)

National Planning and Coordination - of services for the mentally retarded is undertaken by the South African National Council for Mental Health, which has 18 constituent mental health societies and 38 other affiliated organizations rendering services to more than 10,000 mentally retarded persons. The Council has a separate committee known as the Division for Mentally Retarded which coordinates and promotes work among the mentally retarded. The Division has two regional sub-committees known as the Western Cape Forum, and Reef Forum operating in the Cape Province and Transvaal respectively.

VOLUNTARY ORGANIZATIONS

Concerned primarily with mental retardation

The South African National Council for Mental Health
P.O. Box 2587, Johannesburg 2000

Down Syndrome Association (Transvaal)
87 Waterfall Avenue
Craighall, Johannesburg 2196

South African Inherited Disorders Association
P.O. Box 1038, Johannesburg 2000

Others which include mental retardation in their programme

South African Association of Occupational Therapists
P.O. Box 17289, Hillbrow 2038

Jewish Family and Community Council - Transvaal
5, Becker Street, Yeoville, Johannesburg 2198

General Commission for the Services of Mercy
P.O. Box 4420, Pretoria 0001

RESEARCH

Governmental:

Human Sciences Research Council
Private Bag x41, Pretoria 0001

Private:

The South African Council for Mental Health
P.O. Box 2587, Johannesburg 2000

PUBLICATIONS

Professional journals which most frequently publish articles on mental retardation:

South African Medical Journal
P.O. Box 643, Cape Town 8000

Social Work/Maatskaplike Werk
P.O. Box 223, Stellenbosch 7600

The South African Journal of Occupational Therapy
P.O. Box 145, Rondebosch 7700

Rehabilitation in South Africa
Private Bag x117, Pretoria 0001

Directories of Services

Facilities for Mentally Retarded Persons:
S.A. National Council for Mental Health
P.O. Box 2587, Johannesburg 2000

Child Care Information Centre Directory of Services:
Red Cross War Memorial Hospital
Rondebosch 7700

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - Visits by trained public health visitors are undertaken soon after a birth has been reported to the local authorities. The public health visitors are trained to diagnose some forms of mental retardation and are capable of providing parents with advice.

The finding and diagnosis in older children is usually done by the family medical practitioner who refers the parent either to one of the government departments providing welfare services, the psychiatric unit of a Provincial Hospital, or a mental health society for further attention by a social worker who will arrange for placement or further tests.

Education - Training of the mentally retarded is not compulsory but parents of retarded children may be compelled to have these children trained in a state-aided or private training center. Training centres for all racial groups are Government subsidized.

Work-training and employment - Work training and employment is undertaken by the Department of Manpower in respect of mildly retarded persons of all racial groups. Rehabilitation and sheltered employment is restricted to those with a productively potential of at least 50%.

Finance assistance - The Government pays a monthly grant in respect of mentally retarded children maintained in a private home or in a home licensed to accommodate mentally retarded persons. A grant is also paid to centers providing stimulation and developmental programmes for the severely and profoundly retarded.

The Government provides housing loans and subsidies in respect of hostels and protective workshops for adults of all racial groups. In addition all mentally retarded persons above the age of 16 receive a State pension, although amounts differ depending on the racial group.

The Government subsidises training centres for children of all racial groups. Subsidies and loans for hostels are not available for Black children.

Recreation - Organized recreation in the form of dancing, music, swimming, parties and games is available to children in residential homes. Parent groups also often organize outing and other recreation during school holidays.

__Medical care__ - Medical care is available to residential institutions through regular visits by honorary medical practitioners or district surgeons. Free medical care is available to the indigent from district surgeons or at provincial hospitals.

__Residential care__ - State residential care in respect of the mentally retarded is undertaken at four State Care and Rehabilitation Centres and a number of mental hospitals.

__Research__ - In 1967 a State Committee of Inquiry into the care of mentally deficient White persons reported on its study; these recommendations have virtually all been implemented. In June, 1976 the report of a Commission of Inquiry into matters affecting the Coloured Population Group was published. This Commission recommended inter alia that welfare services be confined to one government department instead of being spread under a multitude of departments for the different population groups, and that statutory separation of the races be abandoned. Although the latter is being phased out the number of responsible government departments has doubled.

__Personnel training__ - Specialized training in mental retardation is available to enrolled nurses and public health nurses. Postgraduate training in mental retardation also exists for teachers. Other personnel trained in mental retardation include psychiatrists, psychologists, social workers, physiotherapists, occupational therapists and speech therapists. The S.A. National Council for Mental Health is at the moment (1985) negotiating towards the introduction of other training courses.

__Planning__ - As services for White mentally retarded persons have been brought up to date with many other Western countries during the past five years, voluntary organizations are now concentrating on extending their services to other racial groups. Whereas welfare services were previously virtually only provided by Whites, it is increasingly found that members of the other groups are forming their own organizations and taking over responsibility. Cultural changes in the African and Asian groups particularly are creating an increased demand for services as families are no longer able to care for their own.

OTHER INFORMATION FOR VISITORS

Information about services can be obtained from the S.A. National Council for Mental Health (see above address). The Department of Tourism, Private Bag x252, Pretoria, 0001 will assist in arranging programs for professional visitors or groups of visitors from abroad.

__School holidays__ - are usually during the following months:

December
First half of April
July
Second week in October

S P A I N

Spain is a peninsula with a high arid plateau in the interior, cut by mountain ranges which traverse it from east to west. The climate of the South is dry and hot, the North is fresh and rainy. A constitutional monarchy, the country is organized in 50 provinces and these provinces in 17 autonomous regions. The population is 37 million.

Spain's comprehensive social security system covers old age, invalidity and death, work injury and unemployment, and provides family allowances. Since the Social Security legislation of 1966, these benefits apply to all workers, in industry, services and agriculture, and their families, covering more than 30 million people.

The official language is Castilian (Spanish); Catalan, Basque and Galician are also official languages in their respective regions. The terminology used in the disability field in Spain, as in many countries, is going through changes. The use of "subnormales" is being superceded by "minusválidos" although "deficientes mentales" is still current. In this translation, retardation and disability are used.

GOVERNMENTAL ORGANIZATIONS WITH MENTAL RETARDATION RESPONSIBILITIES

Real Patronato de Prevención
y Atención a Personas Minusvalía
Serrano, 140 28006 Madrid

Royal Board for Prevention and
Attention to Persons with Mental
Disabilities

This organization is under the Ministry of the Presidency of the government; its Honorary President, H.R.H. Queen Sofía, has long been interested in mental handicap. The Board is a strong element in promoting state action on behalf of disable people and coordinates the different public organizations with each other as well as with the various private associations. In recent years, on request of the Board, an active campaign has been carried out on behalf of retarded people, especially in the fields of prevention and education. A July 1986 Decree gives fuller responsibilities to the organization to provide leadership and stimulation in education, rehabilitation, and social integration of persons with retardation.

Ministerio de Educación y Ciencia
Alcalá, 34 28014 Madrid

Ministry of Education and Science

Dirección General de Educación Básica
Los Madrazo, 15 28014 Madrid

Directorate General of Basic
Education

Responsible for educational planning for retarded children in special centers as well as in the regular schools.

Ministerio de Trabajo y Seguridad
Social
Nuevos Ministerios 28003 Madrid

Ministry of Labor and Social
Security

Responsible for Social Security, labor policies in favor of retarded and other disabled people and overall supervision of the field of Social Services.

Dirección General de Acción Social
José Abascal, 39 28003 Madrid
Directorate General for Social Action
Responsible for ministerial policy in Social Services.

Instituto Nacional de Servicios Sociales (INSERSO)
Servicio de Recuperación de Minusválidos
María de Guzmán, 52 28003 Madrid
National Institute of Social Services
Rehabilitation Services for retarded and other disabled people
Responsible for Social Security and rehabilitation in the field of disability.

Unidad Administradora del Fondo de Solidaridad
Agustín de Bethencourt, 11 28003 Madrid
Administrative Unit of Fund for Solidarity
Responsible for disability employment policy.

Instituto Nacional de Empleo (INEM)
Condesa de Venadito, 9 28027 Madrid
National Employment Institute
Responsible for work training of disabled people.

Ministerio de Sanidad
P° del Prado, 18 28014 Madrid
Ministry of Health

Dirección General de la Salud Pública
Directorate General of Public Health
Responsible for prevention policy in the field of mental deficiency.

Ministerio de Administración Territorial
P° de la Castellana, 3 28046 Madrid
Ministry of Territorial Administration

The new structure of the Spanish State has established autonomous regions and this has initiated a process of change. These regions have now full and exclusive authority in the area of social assistance, but share authority with the central government in the educational field. Although the concrete actions in the area of employment integration vary from region to region, the general lines of labor policy are laid down by the central government.

VOLUNTARY ORGANIZATIONS

Concerned Primarily with Mental Retardation

Asociación Española para el Estudio Científico de la Deficiencia Mental
Hospital Infantil Fray Bernardino Alvarez
General Ricardos, 177 28025 Madrid
Spanish Association for the Scientific Study of Mental Deficiency

Created in 1967, the Association is a member of the IASSMD.

Confederación Española de Federaciones y Asociaciones pro Personas Deficientes Mentales - FEAPS
General Perón, 32 1° 28020 Madrid
Confederation of Federations and Associations for Mentally Deficient Persons

The movement of parents, relatives and friends of mentally retarded people, beginning locally in the late 1950's, became a strong national force with the creation of FEAPS in 1964. There are now more than 200 associations which, through joint action, have obtained substantial advances on behalf of persons with mental retardation. The Confederation is a member of the ILSMH and has hosted two general assemblies, a symposium on guardianship (1969) and another on profound mental handicap (1984).

Servicio International de Información sobre Subnormales - SIIS
International Information Service on Mental Retardation
Reina Regente, 5 20003 San Sebastián and Serrano, 140 28006 Madrid

An independent, non-profit institution dedicated to gathering, elaborating, and distributing materials on mental retardation on an international level. Distribution is accomplished principally through its specialized publication, "Guía Bibliográfica del SIIS," ("Bibliographical Guide") and through other publications, books, pamphlets and articles, which contribute importantly to information diffusion on different aspects of mental retardation. SIIS documentation is based on the significant journals published in various representative countries, as well as other publications, books, reports and other documents. Both SIIS libraries are open to the public, without charge, in collaboration with the Royal Board for Prevention and Attention to Persons with Mental Retardation and with the Basque regional government.

Other Organizations which Include Concern in Mental Retardation

Sociedad Española de Pedagogía
Serrano, 127 28006 Madrid
Spanish Education Society

Instituto Nacional de Psicología Aplicada y Orientación Profesional
Juan Huarte de San Juan
Ciudad Universitaria 28003 Madrid
National Institute of Applied Psychology and Vocational Orientation

Asociación de Profesores Especializados en Pedagogía Terapeútica
Association of Teachers Specialized in Therapeutic Education

Asociación Española de Educadores Especializados (AEDES)
Ronda de Toledo, 18 28005 Madrid
Spanish Association of Special Educateurs

ANDE - Asociación Española de Deportes, Tiempo Libre y Ocio para Minusválidos Psíquicos
Ronda de Toledo, 18 28005 Madrid
Spanish Association for Sports, Free Time and Recreation for People with Mental Retardation

RESEARCH

Studies are sponsored by many public agencies dependent on the Ministries listed above, and by different universities. In addition, other organizations are involved, the most important being:

Consejo Superior de Investigaciones
Científicas
Serrano, 121 28006 Madrid

Grupo AMAT de Sociología
General Arrando, 5 28010 Madrid

FUNDESCO - Area de Discapacidad
Castellana, 83-85 28046 Madrid

IAMER
Almagro, 38 28003 Madrid

Instituto Nacional de Pedagogía
Terapeútica
General Oraa, 49 28006 Madrid

Instituto de Investigaciones
"Federico Olariz Aguilera
Facultad de Medicina
Universidad de Granada, Granada

PUBLICATIONS

Only on Mental Deficiency:

Siglo cero and Voces	bi-monthly and monthly edited by FEAPS
Guía Bibliográfica	quarterly edited by SIIS
Síndrome de Down - Noticias	Bulletin of the Down Syndrome Foundation of Cantabria

Include Articles on Mental Deficiency:

Boletín del Real Patronato de Prevención y Atención a Deficientes.

Boletín de Estudios y Documentación - Servicios Sociales. Editado por INSERSO.

Papeles del Colegio, Colegio Oficial de Psicólogos.
Fernández de los Ríos, 87 28015 Madrid

Revista Española de Pedagogía, C.S.I.C.
Serrano, 117 28006 Madrid

BRIEF DESCRIPTIVE NOTES IN PROGRAM AREAS

Diagnosis and Consultation to Parents - During the last years there have been important advances in early diagnosis since both public and private diagnostic services have been extended throughout the whole country. In consequence there is a notable increase in early stimulation through the creation of associations of families and through the disability services of INSERSO (Ministry of Labor and Social Security).

Education - Education of children with mental retardation has also increased in recent years and the present policy of the education authorities emphasizes promotion of integration in ordinary schools; it is estimated that approximately 70 percent of the mental retardation population ought to be in an integrated system, with 30 percent in special education centers. In the latter case, present coverage of needs approaches 100 percent.

Employment - There are enough "occupational centers" as places where people with low level abilities can carry out work of various kinds, in some cases in preparation for more qualified activities, in others, as possibility for an eventual occupation. The policy of the Ministry of Labor is directed to promotion of work opportunities for people with retardation in "special employment centers." In these centers the worker receives the minimum wage and is affiliated with the Social Security program like all other Spanish workers. In order to promote the increase of such centers, the Administration grants financial subsidies and technical consultation.

Medical Attention - In this field in 1985 there was substantial modification of the responsible authorities in that persons with disabilities have ceased to be the exclusive patrimony of the medical profession; concern for them has been "demedicalized" and, on the other hand, concern on the part of public health has substantially increased.

Residential Care - In Spain the same phenomenon is to be seen as in other countries, that is, the institutions and residential homes are becoming smaller and fewer in number. At the same time, there are some experimental programs designed to avoid placement of person with mental deficiency in psychiatric hospitals.

Financial Assistance - Services for people with disabilities are subject to budgetary limitations depending on economic crises. There exist, however, important contributions from the central government, as well as from the autonomous (regional) governments which have exclusive responsibility especially in matters of financial assistance.

Recreation - Recreational activities are largely sponsored by the local associations of FEAPS and other voluntary bodies; summer camping and sports programs are increasingly available, including participation in the European and international organizations of sports for mentally retarded people.

Research - The Royal Board for Prevention and Attention to Persons with Mental Retardation is actively sponsoring interest and action in this field.

Personnel Training - There has been a qualitative and quantitative increase in courses for teachers of special education, and many short-term seminars are given for physicians, psychologists, social workers, educateurs and nurses.

OTHER INFORMATION FOR VISITORS

Information is available from SIIS in Madrid and San Sebastian as well as from FEAPS.

School Holidays - Schools are closed in general from July 15th to September 15th, 20 days at Christmas, and 10 days at Easter.

SRI LANKA

An island republic near the southern tip of India, Sri Lanka has a population of over 16 (1987) million persons; around 70 percent are Sinhalese, the rest being Tamil and Moslem minorities. Its long cultural history includes colonization by Portuguese, Dutch and British, with full independence since 1972. Official languages are Sinhalese, Tamil and English.

Education is free in government schools throughout the island; the literacy rate is one of the highest in Southeast Asia. There are several schools for blind and for deaf children (from 3 to 21 years); educational needs of some children with mental handicap are now beginning to be met, the first school having been started in 1958.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Ministry of Education, Special Education Branch
Malay Street
Colombo 2

Ministry of Social Services
Colombo

Ministry of Health
Colombo

Coordinating body:

Co-ordinating Committee on Special Education, Ministry of Education.

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

The Ceylon Association for the Mentally Retarded (CAMR)
c/o Mrs. C.V. Welikala, President
147, Vajira Road
Colombo 5

Founded in 1968, the CAMR, with a membership of interested citizens, professional workers and parents, serves as a national advisory body to focus official and public interest on the problem, to demonstrate services, promote standards, counsel parents and encourage training of personnel. Some 14 residential homes are affiliated with CAMR, including the Mirigami Government Home. Since 1970 CAMR has held membership in the ILSMH.

Others

Special Education Teachers' Association
7/123 Indika, Sapumal Pedesa
Rajagirya, Colombo

National Council for Child and Youth Welfare
Bank of Ceylon Buildings
Colombo Fort

Maintains three residential homes including the first (1958 - Madiwala, for boys).

Parent Association for Handicapped Children
Sri Palee, Wewala
Horana

Concerned with children who have physical, visual or hearing impairments, or are mentally retarded.

RESEARCH

Faculty of Education, University of Colombo
Munidasa Kumaratunga Mawatha
Colombo 3

PUBLICATIONS

Special Education	Special Education Section Teachers' College Maharagama

A list of residential services could be provided by the C.A.M.R.

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents - Detection and medical services are responsibilities of the Ministry of Health. Referrals are made through the Government Child Guidance clinic in Colombo, the Probation Department and the Social Services Department.

Together with UNICEF, several rural programmes have been held using paramedical personnel and family health workers to identify problems and advise parents how to train the child at home. CAMR also provides consultation to parents.

Education - Retarded children have not been accepted in regular schools until recently. In 1985 two of the government schools in the Colombo district each had a teacher especially trained in mental retardation. About ten units outside Colombo had teachers with short term special training.

Work Training - In 1981 the CAMR opened the Sumaga Training Centre, a demonstration day programme at Mt. Lavinia for 20 persons over the age of 14. Maintenance education includes reading, money recognition, cooking, carpentry, pottery and needlework, social training and sports.

Residential Care - It is estimated that there are some 750 persons in residential care. The Social Service Department manages two custodial care units at Mirigami and Pelewatte. In the 14 homes affiliated with CAMR educational and work training programmes are encouraged.

Medical Care - Government sponsored hospital and dispensary services are free.

Financial Assistance - Except in fee-levying institutions, all others (if standards are approved) receive a monthly maintenance grant from the Social Service Department. Deficiencies are made up from public subscription.

Recreation - Most institutions take the children on excursions, to films and other entertainments, including sports.

Personnel Training - CAMR has initiated government sponsored visits from overseas educational consultants through the British Council and also from Sweden. It also provides lecture courses for teachers and parents, and 3 training courses a year for staff and parents at the Sumaga Centre.

OTHER INFORMATION FOR VISITORS

Inquiries may be made to the appropriate ministries or to the CAMR.

School Holidays - Mid-April to May, two weeks in August, 2 weeks in December.

SWEDEN

Sweden's relatively homogeneous population (8.3 million), her long history of freedom and neutrality, her agricultural and industrial efficiency have resulted in the well known high Swedish standard of living. A basic concept of the right of the individual to live in dignity and security underlies the broad, tax-supported social welfare system, through which about 32% of the gross national product is redistributed (1982).

Sweden participates actively with the four other Nordic countries in many areas of mutual interest, e.g. through participation in the Nordic Association on Mental Retardation, NFPU; her international involvement, especially in aid to developing countries, is generous.

The first special school for the mentally retarded was founded in 1866 and led to the establishment of many provincial boarding schools by the turn of the century. All special services for the retarded are now provided by the 23 counties and 2 municipalities, under special boards appointed by the elected County Councils. A new welfare law for the mentally retarded came into force July 1, 1986. It is a law of rights and prescribes the special services for persons with mental retardation and other developmental disabilities which have to be carried out by the County Councils. Implementation is supervised, stimulated and, to some extent, subsidized by the following two central government agencies:

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Skolöverstyrelsen 106 42 Stockholm	National Board of Education Division for special education
Socialstyrelsen 106 30 Stockholm	National Board of Health and Welfare Bureau for handicap services

Socialstyrelsen operates under the auspices of Socialdepartementet (Ministry of Health and Social Welfare). Skolöverstyrelsen operates under the auspices of Utbildningsdepartementet (Ministry of Education and cultural affairs). Skolöverstyrelsen is responsible for educational matters while Socialstyrelsen supervises other services. Employment services and vocational rehabilitation are organized by:

Arbetsmarknadsstyrelsen 171 99 Solna	National Labor Market Board The Vocational Rehabilitation Division

This agency works under the auspices of Arbetsmarknadsdepartementet (Ministry for the Labor Market).

Statens handikappråd
Regeringsgatan 67
111 56 Stockholm

State Council for the
Handicapped

The Council has advisory coordinating functions and includes representatives for the handicapped, for central state agencies and for federations of County Councils and municipalities.

VOLUNTARY ORGANIZATIONS

Handikappförbundens Centralkommitté
(HCK)
Box 36033
100 71 Stockholm

Central Committee of Associations for the Handicapped

HCK represents 25 national organizations for different groups of handicapped people. There are corresponding groups in all the counties.

With Primary Concern in Mental Retardation

Riksförbundet för Utvecklingsstörda
Barn, Ungdomar och Vuxna (FUB)
Box 5410
Sibyllegatan 7
114 84 Stockholm

National Association for
Mentally Retarded Children,
Youth and Adults

The Swedish Association (FUB) was founded in 1956. With 140 local branches and a membership of 30,000 FUB has close ties to both the executive and legislative branches of government. It receives certain financial support from central and local governments (primarily for parent counselling), but has been able to keep its independence as a consumer pressure group. It is a founding member of the International League of Societies for Persons with Mental Handicap.

RESEARCH

ALA-stiftelsen
Box 5410
114 84 Stockholm

ALA Foundation (FUB)

Project Mental Retardation
Ulleråkers sjukhus
750 17 Uppsala

Sävstaholmsföreningen
Kungsgatan 33
111 56 Stockholm

PUBLICATIONS

"FUB-Kontakt" - published by Riksförbundet FUB

"Steget" - a very easy-read newspaper published by Riksförbundet FUB

"Psykisk utvecklingshämning"
Karl Grunewald, M.D., Editor
Seglarvägen 34
181 62 Lidingö

Quarterly published by the Nordic Association on Mental Retardation. (In 1988 the editorial office moves to Denmark)

Directories - addresses of facilities are available from the two responsible State agencies.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Pediatric departments and large networks of health centers for mothers and children in all counties provide repeated health examinations to virtually all children during their first 2 years, and to a large majority during subsequent pre-school years. A multiphasic screening program for all 4-year-olds has been developed. District nurses, preschool and welfare staff as well as teachers participate in the case finding work. About half the cases of mental retardation do not become apparent before the compulsory school period, which emphasizes the need for early intervention for all children at risk. Information to parents about handicap in their child is improving; consultation services may include special training of parents. Parents' societies (FUB) provide additional consultation, and have initiated a network of toy lending and parent advice projects. The first Lekotek was started by Karin Stensland Junker and Evy Blid in the early 1960s.

Education - Sweden has an ambitious program for child nursery and pre-school services and handicapped children have special rights to such services. School attendance is compulsory for all retarded children between 7 and 17. Vocational training is voluntary. Steps are being taken to serve very severely retarded children and those with associated hearing and sight handicaps more adequately. At the secondary level there are special vocational schools for a large majority of the retarded adolescents, and some "activity training" for the minority unable to benefit from vocational training. Various forms of adult education are available and widely used.

Work Training and Employment - The State Employment Service has special training resources for persons with handicaps and collaborates with vocational guidance specialists in the school system. Many mildly retarded persons get jobs on the open market. There are several forms of sheltered or semi-sheltered work; the State pays 50% (sometimes 90%) of the total wage cost during the first two years and lower amounts (down to 25%) during the following years. Mentally retarded adults attend a day center if no real work is available. Nevertheless, more than 15% of all retarded adults had neither a job nor other meaningful occupation in 1984.

Medical Care - Free health, medical and dental care is provided, more and more by the general health services. Technical aids of all kinds are free of charge, but may be more difficult to obtain for retarded persons with additional physical handicaps.

Residential Care - Most retarded children and adolescents and about 25% of the adults live with their parents. A small and shrinking minority of children and less than 1/3 of the adults live in residential institutions. Most have less than 75 residents, and the large ones are being reduced in size. The institutions include 3 special hospitals for a small minority of complicated cases which are being transferred rapidly to ordinary "care homes", or to small units for intensive treatment. Mentally retarded persons have a right to live like everyone else and in the community with other people. It is no longer permitted to admit new cases into residential homes or institutions; for adults there may be an exception in special circumstances. Group homes in the community are planned for 4 or fewer, with many in small apartments.

Financial Assistance - Parents having much extra work because of the handicap of a child receive an allowance, subject to taxation, of over kr. 21.800 from the social security system, often also additional tax-free amounts from the County Councils. Those above 16 years often get disability pensions of over kr. 21.800 (1985), usually also rental subsidies if they are living with their parents or on their own; parents may get additional amounts as compensation for their work. Most benefits received by disabled adults are tax-free.

Recreation - Public authorities and voluntary organizations, as for example FUB, organize a wide range of leisure time activities, study groups, vacation trips, club activities, summer camps, handicap sports, etc. Yet it is insufficient, particularly for those who are severely retarded, multiply handicapped, or living in rural areas.

Research - A growing number of research projects in mental retardation are supported by State and private funds. The ALA Foundation, Stockholm, sponsored by FUB, is doing work on psychological and other aspects of mental retardation. Ulleråker hospital in Uppsala has published a number of concrete psychological studies evaluating the results of different forms of non-institutional services. Sävstaholmsföreningen is supporting medical and behavioral research. The National Board of Education supports a number of pedagogical and psychological studies including one on children of immigrants and national minorities in special schools.

Personnel Training - There are special training facilities for teachers, home superintendents, work and recreational supervisors, attendants in care homes and other specialists. From 1983 there is a new two-year university education - "Sociala omsorgslinjen" (line of social care) - which leads to different higher level human service positions.

Planning - The boards for special services for the retarded of the County Councils, together with the two central government agencies, the Division of Special Education and the Bureau for Handicap Services, are jointly responsible for the drafting of plans for these services, including 5-year plans that must be made public. Some of the County Councils have published ambitious 10-year plans aimed at more integration and more resources.

OTHER INFORMATION FOR VISITORS

The above listed central government agencies provide assistance in making arrangements for visits. FUB may also be contacted. Information on mental retardation published by the Swedish Institute is available through the Swedish Embassy and Consulates in most countries.

School Holidays - Easter week, the summer period (second week of June to the third week of August) and two weeks at Christmas-time.

SWITZERLAND

Switzerland is a Confederation of 25 cantons and half cantons, each with its own Departments (corresponding to Ministries) of Education, Health, Labor, Finance, etc.

There are four national languages: German (70%), French (19%), Italian (10%) and Rheto-romanche (1%); the first three are official languages. The population is almost equally divided between Protestants and R. Catholics.

In 1841 the world's first known effort to provide "therapeutic" care for a group of severely deficient persons in a separate residential setting was initiated by J.J. Guggenbühl at Abendberg near Interlaken. While Swiss residential homes for children have long had a reputation for good care, and day school programs for slow learners and the mildly retarded began in cities before the end of the 19th century, it was only in the 1960's that special needs of the adult and the more severely retarded of all ages have been recognized. (An exception was a day school program of the City of Zurich.)

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITIES

Federal

- Office fédéral des assurances sociales - Bundesamt für Sozialversicherung Effingerstrasse 33 3003 Berne	Federal Office for Social Insurance (Department of Interior)

Carries the main public responsibility on the national level for rehabilitation for both physically and mentally handicapped persons. It acts as supervisory authority for the 1960 Federal Disability Insurance Act, and has regional bureaus for vocational rehabilitation measures, while cantonal boards examine individual cases and make decisions regarding appropriate rehabilitation measures and disability pensions. The Federal Office is a very dynamic institution carrying great responsibility for policy and action, as the only federal office in charge of disability questions.

Cantonal Departments

Each canton has its own Departments of Education and Health, in general called:

For Education:
- Département de l'instruction publique, or
- Kantonales Erziehungsdepartement

For Health:
- Département de la prévoyance sociale et de la sante publique, or
- Kantonales Fürsorge-und Gesundheitsdepartement

(It is suggested that persons from abroad wishing to contact one of these departments request the address from the Swiss representatives in their country.) There is a coordinative body between these cantonal departments, called "Conference of the Heads of Departments."

National Planning and Coordination

- Commission suisse d'etude pour les problemes des handicapés mentaux
- Schweizerische Kommission für Probleme der Geistigen Behinderung
  Mr. Jean Wahl, Chairman
  c/o Postfach Pro Infirmis, 8032 Zurich

Swiss Commission for the Study of Problems of the Mentally Handicapped

This is a semi-public national coordinating body of representatives of the Federal Office for Social Insurance, the various concerned cantonal Departments and representatives of professional and voluntary bodies; it has 10 working sub-committees and is chaired by Mr. Wahl, Past-President of the Federation of Parent's Associations.

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

Professional

- Association suisse d'aide aux handicapés mentaux (ASA)
- Schweizerisch Heilpädagogische Gesellschaft (SHG)
  Secretariat ASA/SHG, case postale 29,
  Gutembergstrasse 37
  3000 Berne 14

Swiss Association for the Mentally Retarded

Founded in 1889, this organization of professional workers had until the 1950's been primarily concerned with community programs for the mildly retarded child, residential services for persons with all degrees of mental deficiency, vocational training, and the training of personnel. Its regional groups have since then increasingly supported regional programs for moderately and severely retarded children and adults, sheltered workshops, hostels, and were the first to create educational services for children of 1 to 6 years with travelling teachers who see the child at home.

Citizen

- Fédération suisse des association de parents de handicapés mentaux
- Schweiz. Vereinigung der Elternvereine für geisting Behinderte
- Federazione Svizzera delle associazioni di famiglie di ragazzi mentalmente insufficienti

Swiss Federation of Associations of Parents of the Mentally Handicapped
Central Secretariat:
Hans-Hugistrasse 6
P.O. Box 827
2501 Biel-Bienne

Founded in 1960, the Federation unites 57 cantonal or regional associations composed of 7,000 parents and 25,000 professionals and interested citizens. It has played an important role in providing and obtaining services through its member organizations, in contacts with official and professional agencies, and in education of the public. The Federation was founding member of the International League of Societies for Persons with Mental Handicap, and one of its pioneer members, Mme. Y. Posternak, was ILSMH President 1970-1974.

Other National Voluntary Organizations which Include Mental Retardation

Schwiz. Vereinigung Pro Infirmis Association suisse Pro Infirmis	Swiss Association for the Handicapped "Pro Infirmis"

Postfach 129 (Feldeggerstrasse 71), 8032 Zurich

A long established "umbrella" organization uniting in its membership professional service organizations for the various categories of handicaps, Pro Infirmis supports a nationwide network of special agencies (services sociaux) with full time and specialized social workers. More than 1/3 of their clients are parents of mentally handicapped children, or retarded adults. It is a member of Rehabilitation International. Among the members of Pro Infirmis are:

- Fédération suisse pour l'intégration des handicapés dans la vie économique (FSIH) - Schwiz. Arbeitsgemeinschaft Eingliederung Behinderte in die Volkswirtschaft (SAEB)	Swiss Federation for Integration of the Disabled in the Economy Bürglistrasse 11 8002 Zurich
- Union suisse des institutions pour handicapes - Schweiz. Verband von Werken für Behinderte	Union of Sheltered Workshops for the Handicapped Bürglistrasse 11 8002 Zurich
- Association des séminaires de pédagogie curative - Verband der heilpädagogischen Seminarien	Union of Curative Education Seminaries Obergrundstrasse 61 6003 Luzern
- Foundation suisse en faveur de l'enfant infirme moteur cérébral - Schweiz. Stiftung für das cerebral gelähmte Kind	Foundation for Cerebral Palsied Children P.O. Box 2234 3001 Bern
- Verband anthroposophisch tätiger Heilpädagogen und Institutionen in der Schweiz	Association of Anthroposophic Curative Education Teachers and Institutions in Switzerland Sonnenhold, 4144 Arlesheim

PUBLICATIONS

Pro Infirmis Postfach 129, 8032 Zurich	Bimonthly journal concerned with all categories of handicapped persons
Pages romandes de l'ASA Case postale 29, 3000 Berne 14	An independent French-language quarterly publication edited by ASA

Schwizer Erziehungs-Rundschau Revue suisse d'education ASA/SHG P.O. Box 29, 3000 Berne 14	SHG/ASA contributes articles on mental retardation to this monthly
Heilpädagogik Institut Für Helpädagogik Universität Freiburg Canisius-Strasse 21, 1700 Freiburg	A quarterly journal concerned with special education in all fields
Appell P.O. Box 827, 2501 Bienne	Published quarterly, in French and German, by the Swiss Federation of Parents

The Office fédéral des assurances sociales publishes a monthly paper, (Effingerstrasse 33, 3003 Berne), "RCC" in French, "ZAK" in German.

Directory - Rehabilitations Einrichtungen (Institutions de réadaptation) is a listing of medical facilities, special schools, vocational training centers, sheltered workshops, hostels and residential homes for the handicapped, published by Pro Infirmis.

RESEARCH

Research on various aspects of mental retardation is carried on in all universities and in the large hospitals, especially the children's hospitals. The Institut für Hirnforschung in Zurich has a major interest in mental retardation.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - In the larger cities there are specialized diagnostic centers specifically prepared to deal with mentally handicap. In general, children's hospitals, specialized physicians for children, the widely spread infant welfare services with regular medical consultations for mothers, and school medical officers and psychologists (assessing school-age children) do the main case finding. Opportunities for specialized consultation to parents are not yet sufficient, although the social services of Pro Infirmis, the staff of many day schools, and local parents' associations as well as the travelling teachers are prepared to give services.

Education - Until the 1950's, Swiss schools accepted children of mild and moderate retardation in the same schools with sufficient specialization in different grades only in the larger cities. Based primarily on the experience of the "Heilpädagogische Hilfsschule" of the city of Zurich Schools Department, and the institutions under anthroposophic direction, special schools for moderately and severely retarded children have been created by the school authorities in all cantons.

In order to help parents in their educational tasks and to begin the specialized training as early as possible, the Association suisse d'aide aux handicapés mentaux and the Swiss parents Federation employ travelling teachers who visit families with retarded infants up to kindergarten age, and provide minimum special education to school-age children living in isolated mountain valleys.

Work Training and Employment - Vocational training centers and sheltered workshops for the mentally retarded have been established in increasing numbers; however, as yet not all of those persons needing this type of training and work opportunity can be accommodated. There are over 260 sheltered workshops (with more than 15,000 places) many serving a mixed clientele of physically and mentally handicapped persons.

Medical Care - Switzerland has a high standard of medical care but until recently, only limited interest in the health problems of mentally retarded people. Most hospitals have introduced a PKU prevention program which has contributed to increasing the interest of physicians.

Residential Care - Nearly 130 years ago the first attempt to give special care and training to the severely retarded in a residential home was done by Guggenbühl near Interlaken. There are many institutions at present, purposely kept small (usually with less than 100 residents) mainly under private and church auspices. Educational and vocational training is emphasized and for retarded adults - including adults who are severely handicapped, continuing educational programs now exist.

Hostels for retarded adults in sheltered employment have been established within the community in Zürich, Basle and other towns, and several residential centers, such as those under anthroposophic direction, provide family living and employment for moderately and severely retarded young adults. An example is "Aigues Vertes" in the Canton of Geneva, run by members of the Camphill movement in cooperation with the Geneva Parents' Association.

Financial Assistance - Since 1960 the Swiss Invalidity Insurance System has pioneered in giving financial assistance to families of the mentally retarded, to the retarded person himself, and in providing subsidy to agencies rendering what can be considered preventive services. (These include programs for education and training as well as counselling provided to families by the parent associations.) Rehabilitation is looked upon as a vital secondary preventive service.

Recreation - Special programs, clubs, vacation colonies and camps (both summer and winter) are sponsored by special day schools, residential centers and the parents' associations.

Research - World renowned has been the research work toward better understanding of cognitive development in early childhood of the late Professor Jean Piaget and his assistant, Dr. Bärbel Inhelder, who has applied Piaget's theory to the area of mental retardation at the Institute of Educational Sciences, University of Geneva. A certain amount of research in mental retardation is carried out in university medical schools and childrens hospitals.

Personnel Training - Specialized training courses for teachers and for "éducateurs" (child care workers) are available in Zürich, Fribourg, Lucerne, Basel, Lausanne, Zetzwil and Geneva, which also has a training course for sheltered workshop staff. The Universities of Geneva, Basel, Fribourg and Zürich offer courses in mental retardation.

Planning and Coordination - On the government level the Swiss Commission for Problems of Mental Retardation was established in 1967; through its 10 task forces (subcommittees) the Commission has concentrated on fact finding, and has made recommendations in such areas as training and community services for the very young retarded child. Another Commission report on the place of the mentally retarded in Swiss legislation provides a very complete study and recommendations. (Printed only in German.)

OTHER INFORMATION FOR VISITORS

Request for information and assistance in planning visits can be made to:

Pro Infirmis
Postfach 129
8032 Zurich

Swiss Federation of Parents of the Mentally Handicapped
P.O. Box 287
2501 Biel-Bienne

or other organizations listed above.

School Holiday Periods - vary from canton to canton but generally occur from about December 20th to January 10th; Easter; July and August.

THAILAND

Thailand is a Southeast Asian tropical country about the size of France. Its 50.7 million people are primarily of Thai stock and rural. There are minority groups of urban Chinese, Malay-speaking Moslems in the south and Vietnamese and hill tribes in the northwest and north. About 94% of the people are Buddhist. The language is Thai, related to Sanscrit and Pali. English is the official second language. Bangkok, the capital, is a modern city with a population of over 4 million.

The Kingdom of Thailand is the only Southeast Asian country never under a colonial power. Modernization began in the late 19th century and since 1932 it has been a constitutional monarchy. Administratively, the country is divided into 73 provinces, further subdivided into districts, towns and villages.

A concerted effort has been launched by the government to improve standards of health, education and economic security and an unusually large part of the national budget goes to economic development and education. Schooling is compulsory between ages 7 and 14; the literacy rate is high. There are 12 universities, many training colleges and vocational schools.

The first special program for the mentally retarded was a training school and residential institution established by the government in 1962.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Public Health
Devavesma Place, Bangkok

Department of Medical Services
Rajanukul Hospital School for the Mentally Retarded
Institute of Mental Deficiency
4737 Dindaeng Road, Bangkok 10400

Ministry of Education

Department of General Education
Special Education Division
Rajadamnoen Road, Bangkok 10300

Ministry of Interior

Department of Public Welfare
Krungkasem Road
Child & Youth Welfare Division
Bangkok 10100

Welfare for the Destitute Division
Krungkasem Road
Bangkok 10100

Department of Labour
Fuang Nakorn Road
Bangkok 10100

Industrial Rehabilitation Centre
Bangpoon
Rangsit Road, Bangkok

VOLUNTARY ORGANIZATIONS

Voluntary Organization with Primary Concern for the Mentally Retarded

Association for the Retarded of Thailand
18 Soi Sawadi Amlnuayvetya, Pradipat Road, Bangkok 10400

Founded in 1975, this Association is a member of the International League of Societies for the Mentally Handicapped (since 1975). While its primary concern has been with the country's first training school and hospital, Rajanukul, a wider concern is developing.

Foundation for the Welfare of the Mentally Retarded under the Royal Patronage of Her Majesty the Queen
4739 Dindaeng Road, Bangkok 10400

Staban Saeng Swang Foundation
55 Sukumvit Road Soi 38
Bangkok 10400

Foundation for the Welfare of Mentally Handicapped Children
78/6 Bangtalad Subdistrict
Tivanond Road
Nonthaburi Province 11120

"Bannkaroon" Private Kindergarten School
4/33 Samakki Road
Bangtalad Pakkred
Nonthaburi 11120

Other Organizations which Include Some Concern for the Mentally Retarded

National Council on Social Welfare of Thailand
Mahidol Building
Rajavithi Road, Bangkok 10400

Foundation for the Deaf
137 Rama V Road
Dusit, Bangkok 10300

Council of Disabled People of Thailand
78/2 Tivanond Road Pakkred
Nonthaburi 11120

RESEARCH

The Department of Medical Services in the Ministry of Public Health has established 2 subcommittees with responsibilities for research concerning mental retardation and physical medicine. In addition, some psychiatric foundations support research in mental retardation:

Foundation of Dr. Vichien Phaetayakon, Somdej Chaophya Hospital, Klong Sarn District, Bangkok 10600.

The Foundation of Jittavejsart Songkroh and the Foundation of Prof. Phon Saengsingkeo at the Mental Health Division, Tivanond Road, Muang District, Nonthaburi 11000.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Findings, Diagnosis and Assessment, Consultation to Parents - Initial case finding and diagnosis is provided to those who bring their children to the Rajanukul Hospital directly or to the University Hospital, psychiatric hospitals, and Child Guidance Centre. Children who are below school age or older may be referred by the maternal and child health centres, midwives, public health nurses, or teachers to these centers.

With a current capacity of 499 beds, the Rajanukul Hospital (formerly Pan-Ya-On Hospital) was founded in 1962 as a technical model institute and now provides four types of daily rehabilitation services: medical (50 clients), vocational (150), educational (275). All receive training in the personal, social and activities of daily living skills.

Some new diagnostic and rehabilitation centres may be created in the northern and southern part of the country by 1991.

Education - Some mildly retarded children attend classes of slow learners which are organized in 10 normal schools by the Division of Special Education. The first school for the mildly retarded was managed by the Foundation of the Welfare of the Mentally Retarded under the Royal Patronage of Her Majesty the Queen. Called the Panya Wuttikorn School for the Mentally Retarded, it currently is a day school serving 139 mildly retarded students with 19 teachers from the Special Education Division. The Division has organized a school in Cheingmai Province, the Kawila Anukul, serving 242 students with 23 teachers.

Work Training and Employment - Work-training, prevocational training and vocational training have been provided to 150-200 trainees in Rajanukul Hospital and the outside training centres of the Hospital. In addition, there is a sheltered workshop for 100 adolescents and adults in the Punya Wuttikorn School complex. Further, the Public Welfare Department organized a sheltered workshop for approximately 100 persons with physical handicaps.

The industrial rehabilitation centres organized by the Department of Labor, in Pathum thani Province, serve those disabled persons whose disabilities have been caused by occupational accidents. Some may be mildly retarded workers who may have passed level 4 of the elementary school and become good laborers in industrial work. Most of the mildly or even moderately mentally retarded have training in an ordinary work place or family industry.

Medical Care - for all persons with mental retardation is provided by the same agencies serving the general population.

Residential Care - Rajanukul Hospital provides residential care for persons who live far away or for those who live in other provinces. There are four dormitories for boys and two for girls, and one for children below seven years of age. A total of nearly 350 clients stay weekly or monthly. A group of adolescents live at a separate house of four persons located at the Vocational Training Centre for young men. The residential services for orphans are provided by the Child Youth Welfare Division, a Home for Mentally Retarded Babies (providing care for 312 under five years of age) and the Home for Mentally Retarded Children (providing for 472 between 5-8 years of age).

Financial Assistance - There is some government assistance available as provided in annual budgets. Fund raising is the primary source of income to private agencies. The personnel aid and special teachers for the Pan-Ya Wuttikorn School are paid by the Special Educational Division. During recent years some foreign and religious agencies gave support to some non governmental agencies.

Recreation - The programs for training have included recreational therapy as a method to motivate students but is very limited due to budgetary constraints. Mostly, indoor games, watching T.V. are the major leisure time activities. Special camping or sea-beach trips for small groups are arranged occasionally. Sport for the disabled has been sponsored yearly to commemorate a day for the disabled organized by the National Council on Social Welfare in Thailand.

Research - There are about twenty research projects on mental retardation reported by researchers at the Rajanukul Hospital, with another five projects being undertaken. (See also earlier paragraph.)

Personnel Training and Development - Courses for special teachers for the disabled are available at the Suan Dusita Teachers College, the Teachers College Department, Ministry of Education, and the Educational Faculty of Chulalongkorn University. About 25 special teachers graduate with a Bachelor Degree yearly.

The Rajanukul Hospital with collaboration of the Foundation for the Welfare of the Mentally Retarded under the Patronage of Her Majesty the Queen and the Cumberland College of Australia provide a three week training course on various topics concerning training personnel for the sheltered workshops and early intervention programs. A recent training course was "Application of Principles of Occupational Therapy and Physiotherapy in the Care of the Mentally Retarded and Teaching Social Skills to the Mentally Retarded in the Thai Culture."

Medical students and young medical doctors have been enlightened in the newly developed techniques of rehabilitation for the mentally retarded. They are also taught about multidisciplinary teamwork. Many prevention programs are being taught through the public health agencies.

Legislation - There is no legislation for disabled persons in Thailand yet. The law of disabled persons is being drafted and is energetically supported by the Council of Disabled People of Thailand.

Future Plans - By 1991, the Rajanukul Hospital plans to extend its services into the northern and southern provinces to serve school age children with mental retardation, also pre-preschool age children. It is also planning, with various other organizations, to hold the 9th conference of the Asian Federation for the Mentally Retarded in Bangkok in 1989.

OTHER INFORMATION FOR VISITORS

Requests for information and arrangements for visits may be directed to:

Dr. Vanrunee Kormkris, Director
Rajanukul Hospital and Schools for the Mentally
4737 Dindaeng Road
Bangkok 10400 Thailand

School Holidays - periods are ten days in mid-October and final holiday from mid-March to mid-May.

TUNISIA

Tunisia has a population of nearly 8 million; 40 percent are urban dwellers and 40 percent children below the age of 15 years. The infant mortality rate is 50 per 1000. The population growth rate is 24 percent.

Formerly a French protectorate, Tunisia was declared a republic in 1957 with Bourgibia as President. In 1989 Zine BEN ALI was elected president for five years. The official language is Arabic, but French is widely used and taught in the schools. Agriculture is the backbone of the economy although handicapped by inadequate water supplies in many parts of the country.

Tourism is an important source of income. There is considerable unemployment, but despite the economic problems, considerable progress is made in the health, education and welfare fields. For example, women may vote; education is free (95% of children under 15 are enrolled in school). Social security is provided for all employees.

Interest in the welfare of the mentally retarded appeared in 1966, the year when the national parents association, U.T.A.I.M., was founded. This body was recognized in 1972 as an "etablissement d'utlité publique."

The official responsible body is the Ministry of Social Affairs, whose participation centers around the provision of personnel, financial assistance, health care, and training.

GOVERNMENT AGENCIES WITH RESPONSIBILITY FOR MENTAL RETARDATION

Ministère des Affairs Sociales Boulevard Bab BNAT - Tunis 1006	Ministry of Social Affairs
Secrétariat d'Etat auprés du Ministère des Affaires Sociales Boulevard Bab BNAT - Tunis 1006	Secretary of State for Social Affairs
Direction Générale de la Protection Sociale	General Directorate for Social Protection
Direction de la Solidarité et de la Protection Sociale	
Service des handicapés et de la readaptation	Service for Rehabilitation of Handicapped Persons
Institut National de Promotion des Handicapés	National Institute for the Handicapped
(Centre "La VOLONTE" 77 Rue Yougoslavie - Tunis 1000	Center for persons with moderate handicap
Ministère de l'Education Nationale Boulevard Bab BNAT - Tunis 1006	Ministry of Education
Direction Pédagogique	Pedagogy Department

Ministère de la jeunesse et de l'enfance Avenue Hedi Chaker - Tunis 1030	Ministry of Children and Youth
Direction de l'enfance	Department for Children
Ministère de la sante publique Bab Saadoun - Tunis 1030	Ministry of Public Health
Direction des soins de sante de base	Department for basic health services
Unite de soins maternals et infantiles	Unit for maternal and child health services

VOLUNTARY ORGANIZATIONS WITH PRIMARY CONCERN IN MENTAL RETARDATION

L'Union Tunisienne pour l'Aide aux Insuffisants Mentaux (U.T.A.I.M.) 5, Rue Khémais Ternane, Montfleury Tunis 1008	Tunisian Union for Aid to the Mentally Retarded

Founded in June 1966, U.T.A.I.M. is a parent-sponsored organization which has a highly qualified advisory committee including physicians, educators, clergy and public relations advisors. It became a member of the International League of Societies for the Mentally Handicapped in 1970 and in 1975 organized the first Regional Arabic Conference on Mental Handicap, under the auspices of the International League, attended by government, professional and voluntary leaders from 9 Arab countries. U.T.A.I.M. publishes an annual report of its activities and occasional brochures and journals. It conducts 38 non-residential specialized schools and workshops throughout the country (300 staff - 2000 clients).

Association "Les Anges" (1 center) - Rue Ibn Arafa - La Marsa 2070	Association for parents of severely multihandicapped children
Association "Aouladouna" - 169, Av. Habib Bougatfa - SFAX 3000	Association for mentally handicapped and psychotic children
Union Nationale de Solidarité Sociale "Foyer des Handicapés Mentaux sans Famille" (1 Center) 8, Rue Habib Thameur - Manouba 2010	National Union of Social Solidarity Home for mentally handicapped persons without family.

Others

Fédération Tunisienne des Sports pour Handicapés	Federation of Sports for the Handicapped
Commission Nationale des Sports pour Insuffisants Mentaux 5, Rue Khémais Ternane - Montfleury 1008 Tunis	National Commission on Sports for the Mentally Handicapped

Association des parents et amis
des Handicapés de Tunisie (APAHT)
608 Imm. SNIT
Boulevard 9 Avril - Tunis

Tunisian Association of
Parents and Friends of the
Handicapped

RESEARCH

Institut National de Promotion des
Handicapés
Rue Bab BNAT, Tunis

National Institute for the
Handicapped

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, diagnosis and assessment, consultation to parents - These are provided through maternal and child health services, private physicians and general hospitals. U.T.A.I.M. provides family counseling to the extent possible.

Education - Special education for retarded children is being provided in some of the government homes for dependent children, and in some private and government schools. For example, U.T.A.I.M. assists 40 Centers serving 2 year olds through adults. In these centers special education and pre-vocational classes are held.

Work training and employment - A pilot project is being carried on under the Rehabilitation Service of Social Affairs to provide vocational training for mildly retarded youths between 12 and 16 years of age. In the 4 adult U.T.A.I.M. - assisted day centers, vocational training is provided (e.g. in handcrafts and farming).

Medical care - is provided in various hospitals and by the several projects serving handicapped children.

Residential care - Under the Children's Service of the Ministry of Social Affairs, the government has an extensive system of orphanages and "Bourguiba Villages" where some of the children are retarded, as is to be expected in a random sample of the population. In two of these, special education is being provided: Institut National de Protection de l'Enfance, (Föyer d'enfants Salatieddine Bouchoucho in Kassar Said) and the Centre d'Accueil de Fata in Bizerte. There are two residential centers for profoundly handicapped children in SFAX.

Financial assistance - The main subvention is available through the central government (social security program); municipalities and private societies also contribute.

Recreation - U.T.A.I.M. sponsors a weekly recreation club program for mentally retarded children, and yearly summer camps. Sports activities are very well developed, with regional, national and international participation.

Research is being undertaken in connection with the Institut National de Promotion des Handicapés of the Ministry of Social Affairs' Rehabilitation Service. A survey has been made by the Research Department of the Ministry of Education to ascertain the number of children with physical or mental handicaps in the elementary schools, supplemented by information from the Social Services on the number of handicapped persons above and below elementary school age. Another study concerns the prevention of mental retardation with socio-economic causes. A research programme with financial assistance from the World Health Organization has been made by the Ministry of Health's Institute of Neurology, concerning frequency rate and origins of handicaps in Tunis.

Personnel training is provided primarily on an in-service basis. Some teachers have had short term or 2 year training in Switzerland and France. The Ministry of Social Affairs has taken responsibility for training since 1988, and a National Institute for teacher training has been opened.

Planning in this special area has not yet taken place on a national level. U.T.A.I.M. has increasingly undertaken the responsibility of bringing information on mental handicap to the public through the news media and television.

OTHER INFORMATION FOR VISITORS

Assistance in planning visits or obtaining information may be requested from:

Secretariat d'Etat auprès du Ministère des Affaires Sociales
Boulevard Bab BNAT, Tunis 1006

or L'Union Tunisienne pour L'Aide aux Insuffisants Mentaux (U.T.A.I.M)
5, Rue Khemais Ternane, Montfleury, 1008 Tunis

School vacation periods:

Winter - approximately December 22 to January 2
Spring - approximately March 19 to April 2
Summer - mid - June to mid - September

TURKEY

The Republic of Turkey is located partly in Europe and partly in Asia. Its population of over 43 million is largely concentrated in the main cities of Ankara, Istanbul and Izmir; education and health institutions are primarily based in the urban areas. Education is free and compulsory at the elementary level (5 to 14 years) but schools are not yet everywhere available. Literacy is at 55%.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education

Milli Eğitim, Gençlik ve Spor
Bakanlükar, Ankara

Office of Special Education

Özelegitim Dairesi
Besevler, Ankara

Ministry of Health and Welfare
Ankara

VOLUNTARY ORGANIZATIONS

Ögretilebilir Çocuklari Koruma
Derneği - Genel Merkesi
Atlik Kuyuyazisi caddesi
Kivrimli sokak No. 27
Ankara

Association for the Protection of Mentally Handicapped Children

Founded in 1965 by interested parents, this organizations is the only one dealing with moderately and severely retarded children (I.Q. not exceeding 50). In 1987 140 children were in its care. The Administrative Board is responsible not only for their education and training but also must provide the necessary funds as no official subsidies are available for these children. Member of the International League of Societies for Persons with Mental Handicap since 1978.

Geri Zekali Çocuk ve Yetişkimler
için Rehabilitasyen Merkesi
Yaptirma Derneği
1202 ci sokak No. 72
Izmir

Association for the Foundation of the Rehabilitation Center for Mentally Handicapped Children and Adults

Including Mental Retardation

Türk Anneler Derneği
Koska Caddesi 15
Laleli, Istanbul

Turkish Mothers' Association

BRIEF NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Parent Counselling - The Ministry of Health and Welfare is responsible for early diagnosis; in fact most assessments are made in referral from the schools. Of the 67 main cities and towns in Turkey, 50 have test bureaus for the diagnosis of retarded children. Families with means may turn to the university hospitals for consultation.

Education - is provided primarily through special classes in regular primary schools. In 1985 there were 517 classes in 29 cities, serving 6,861 children; children are eligible if they have a tested IQ above 50. Social adaptation and work skills are emphasized. Ankara, Bursa and Istanbul had the largest number of classes (93 with 1067 children, 66 with 1014 children, and 68 with 1054).

Educational services for children not accepted by the public schools are very limited - 140 are attending the school managed by the parents association in Ankara; plans are under way by a parent group in Izmir for a "rehabilitation center" . The less able children have been kept at home or placed in an orphanage or mental hospital.

Work Training Schools - (Milli Eǧitim Bakanliǧi Özürlüler Is Okulu) exist as semiofficial organizations in Bursa, Bornova-Izmir, and Adana.

Residential - In 1977 a residential home was opened by the Turkish Mothers' Association in the Florya Area of Istanbul for 100 boys and girls with moderate to severe retardation (IQ between 50-30).

Research, Personnel Training - School achievement and social adaptation assessment studies have been made by the Pedagogical Institute of Istanbul University. The University of Ankara has been a center for teacher training in special education but its unit for training in mental retardation was abolished by the Higher Education Council in 1985.

Planning and Coordination - The Turkish Foundation of Disabled Persons (Atatürk Bulvan No. 73/11, Kizilay, Ankara) is designated as a national co-ordinating body. Voluntary associations for cerebral palsy, for blind persons and those with hearing problems are active, but persons with intellectual disabilities seem so far not to be included.

INFORMATION FOR VISITORS

Request from the Association for the Protection of Mentally Handicapped Children or the Turkish Mothers' Associations.

UGANDA

The Republic of Uganda in East Africa has a population of 15.9 million (1987 estimate) with an average annual growth rate of 3.4%. Kampala, the capital and largest city, has half a million people. Approximately a quarter of the land and 90% of the labor force is in agriculture, mostly subsistence farming. Uganda became independent in 1962, having been a British protectorate for 68 years. Since January 1986 it has been governed by the National Resistance Council following nearly two decades of unstable conditions, including periods of terrorism and civil war.

As has been the case in most countries, services for children with blindness and other physical handicaps were developed first. In 1970 a national campaign to provide rehabilitation services emphasizing prevention and treatment of polio, and vocational training for adults with physical disabilities, brought international attention and assistance.

The first special service for mentally handicapped children seems to have started in 1979 when the two-year old Mercy Children's Center in Kampala (which provided day care for young children of working mothers) agreed to admit the retarded child of a physician desperately seeking schooling for his child, together with two other children. Following the establishment of the Uganda Association for the Mentally Handicapped in 1983, a total of six centers were set up in the first two years, in five different Districts (eastern, southern, northern, western and central) although lack of funds, trained personnel, transport problems and lack of classroom materials have constrained developments.

The Uganda Association for the Mentally Handicapped is a member of Network Africa, initiated at the Nairobi Congress in 1982, and through it has access to and assists in the development of training programs and future collaborative action.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Education
Special Education Unit
P.O. Box 7063
Kampala

Ministry of Culture, Rehabilitation
and Community Development
P.O. Box 7136
Kampala

Coordinating Organization:

National Council of Voluntary Social Services
P.O. Box 3180
Kampala

VOLUNTARY ORGANIZATION

Uganda Association for the Mentally Handicapped (UAMH)
P.O. Box 9177 Visiting Address: Nile Avenue
Kampala
Crested Tower Building
Floor 11/14 Short Tower
Kampala

Between 1979 and 1981 a few individuals had visited other countries to learn what was being done in the field of mental handicap. In November 1982 a small group of educators and government officials attended the World Congress of the International League of Societies for Persons with Mental Handicap and the preceding Workshop on Mobilization of Local Resources in African Countries.

The need to mobilize parents in particular led to the establishment of the Uganda Association for the Mentally Handicapped in February 1983 with 120 founding members. Main goals were to encourage the development of services as well as to inform the general public,which still has a high level of misinformation and prejudice. UAMH became a member of ILSMH in 1986.

Other

Kampala School for the Physically Handicapped
P.O. Box 14278
Kampala

Has accepted a small number of mildly mentally handicapped children with physical disability.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, assessment, parent counselling - Identification is usually made by parents, teachers or professional workers from the Uganda Association. The area of diagnosis and assessment is one which needs attention and plans were underway for a medical Bureau to provide this service. There are still too many parents who feel that it is a disgrace to have a mentally handicapped child.

Education - In 1985 the six centers included the Kampala School for Mentally Handicapped and the Mercy Children's Center in the Kampala District, and schools in the Mukono, Masaka, Apac and Masindi Districts.

Work training and employment are being studied by the Association, and it is hoped that a start can be made in such areas as poultry keeping and simple gardening.

Medical care - the Red Cross is trying to assist all the centers.

Financial assistance is greatly needed and private or corporate donations are solicited at home and abroad. Most Teachers' salaries are provided by the Ministry of Education.

Personnel training is still very much needed, not only educational, but medical and social work. Parent education is recognized as an urgent training area and efforts are made to assist when a very severely handicapped child must be kept at home or is put in care of a grandmother.

OTHER INFORMATION FOR VISITORS

Request from the Ministry of Education, Special Education Unit, who together with the Ministry of Foreign Affairs will arrange a program for a professional visitor or group of visitors.

School holidays - Schools have a three term system; mid-January to mid-April; mid-May to mid-August and mid-September through the first week in December.

THE UNITED KINGDOM OF GREAT BRITAIN
England and Wales, Scotland and Northern Ireland

The 1987 population is estimated at 56.8 million; approximately 25% live in the prosperous south west corner and nearly 7 million in the Greater London area. Three languages are spoken, English, Welsh and Gaelic. While Wales, Scotland and Northern Ireland are directly represented in Parliament, each has a Secretary of State, a member of the Cabinet, who is responsible for administration of their affairs. Britain is a member of the European Economic Community and the Council of Europe. Many of its former colonies and possessions are members of the British Commonwealth, an informal governmental association. Immigrants from these countries have certain entry advantages and make up an increasing number in the larger cities.

Primary and secondary education from age 5 to 16 is free and compulsory. Social security is a comprehensive national system covering maternity, unemployment, industrial accidents, old age, family support and housing costs. Since 1948 the National Health Service has provided free medical and nursing care, and has been responsible for residential institutions ("hospitals") for mentally handicapped people. Provision of local education, housing and social services is largely the responsibility of elected local authorities. Beginning in the 1960's there has been a gradual shift away from hospital to community care and increasingly a need for team work and cooperation, locally and regionally between statutory and voluntary services.

Terminology has shifted, as elsewhere, from mental deficiency, mental subnormality (educational and severe) to mental handicap, mental impairment and most recently, to "people with learning difficulties."

ENGLAND

GOVERNMENT DEPARTMENTS WITH PRIMARY RESPONSIBILITY FOR MENTAL HANDICAP

Department of Health and Social Security (DHSS)*
Alexander Fleming House
Elephant and Castle
London SE1 6BY

This Department is directly responsible for social security benefits, and indirectly for social services and health services in England. It holds responsibility for strategic planning of the National Health Service which provides hospital and community medical services. The Department also has a responsibility for the social services provided by local authorities, including training, homes and domiciliary support. There are 14 Regional Health Authorities and 192 District Health Authorities.

*Editor's Note: In the summer of 1988 DHSS was divided; matters relating to mental handicap are now mainly with the Department of Health.

Department of Education and Science (DES)
Schools 3 Branch (Special Education)
Elizabeth House
York Road, London SE1 7PH

The Department is responsible centrally for the education of mentally handicapped children. Local Education Authorities are required to ascertain which children in their area require special education, and provide it in consultation with the children's parents.

OTHER GOVERNMENT DEPARTMENTS WITH SOME RESPONSIBILITY FOR MENTAL HANDICAP

Department of Employment
Caxton House
Tothill Street
London SW1H 9NF

Manpower Services Commission
Moorfoot
Sheffield S1 4PQ

Employment responsibilities include vocational guidance, rehabilitation, training and placement. There is a National Advisory Committee on the Employment of Disabled People.

Coordination and Planning - The Minister for the Disabled in the Department of Health and Social Security helps to coordinate action in relation to services for all disabled people. From 1975 to 1980 a National Development Group for the Mentally Handicapped helped the Secretary of State with policy decisions in the field of mental handicap. A National Development Team for Mentally Handicapped People, set up at the same time, can assist local and health authorities on the improvement of services at a local level.

VOLUNTARY ORGANIZATIONS

Primary concern in mental retardation
Professional

Association of Professions for the Mentally Handicapped (APMH) (founded 1974)
126 Albert St., London NW1 7NF

British Institute of Mental Handicap
Wolverhampton Road
Kidderminster, Worcestershire DY10 3PP

British Society for the Study of Mental Subnormality
Monyhull Day Hospital, c/o Psychology Department
Birmingham 30

Citizen

Royal Society for Mentally Handicapped Children and Adults (MENCAP)
Mencap National Centre, 123 Golden Lane, London EC1Y 0RT

Founded 1947; now unites some 500 local societies of parents and friends in England, Wales and Northern Ireland. (Scotland has its own Society.)

Objects: To secure for mentally handicapped people provision commensurate with their needs; to increase public awareness of the problems faced by mentally handicapped people and their families.

Activities: Offers support for mentally handicapped people and their families through its network of local societies and District offices. Services include welfare and legal advice, and counselling for families with a mentally handicapped member; Holidays; Trustees Visitors Service; Pathway-Employment Service; MENCAP Homes Foundation, Training Establishments, and Leisure facilities through the National Federation of Gateway clubs. MENCAP was a founder member of the International League of Societies for Persons with Mental Handicap, hosting its first Conference in 1961 (as the European League) and several symposia since that time.

Campaign for People with Mental Handicaps (CMH)
12A Maddox Street
London, WIR 9PL

Created in 1971 by a small group of professional and civic workers and parents, and operating on a small budget, this advocacy group quickly achieved a place of influence in the development of national programs because of its effective studies and cogent recommendations. Its many published reports have also had an impact internationally.

Down's Children's Association
12-13 Clapham Common Southside
London SW4 7AA

Active nationally only in the last few years, this association has become increasingly effective both in its work with parents and individuals with Down's Syndrome, and its impact on the public.

Other organizations which include interest in mental handicap concerns

It is not possible to list all the relevant organizations. Some important ones are:

The King's Fund Centre
126 Albert Street, London NW1 7NF

The Spastics Society
12 Park Crescent, London W1N 4EQ

National Association for the
Welfare of Children in Hospital
29-31 Euston Road, London, NW1 2SD

The Toy Libraries Association
for Handicapped Children
Seabrook House
Wylofts Manor, Darkes Lane
Potters Bar, Herts. ENG 2HL

The King's Fund College
2, Palace Court, London W2 YHS

National Autistic Society
276 Willesden Lane, London NW2

British Epilepsy Association
Crowthorne House, Bigshotte
New Wokingham Road
Wokingham, Berks. RG11 3AY

Camphill Village Trust
Delrow House, Hilfield Lane
Aldenham
Watford, Herts. WD2 8DJ

L'Arche Scretariat (UK)
14 London Road
Beccles, Suffolk

Ravenswood Foundation
221 Golders Green Road
London NW11 9DZ

Parents for Children (adoption
of children with special needs)
222 Camden High Street, London NW1

Exodus (campaign to bring children
out of institutions)
16 Fitzroy Square, London W1P 5H2

Associations of professional workers with some concern in the field of mental handicap are:

National Council for Special Education
1 Wood St., Stratford-upon-Avon
Warwickshire CV37 6JF

British Assosciation of Social Workers
16 Kent Street, Birmingham B5 6RD

British Psychological Society
47 Princess Road East
Leicester LE1 7DR

Royal College of Psychiatrists
17 Belgrave Square, London SW1X 8PG

Royal College of Nursing
20 Cavendish Square, London W1M 0AB

Confederation of Health Service Employees
Glen House, High Street, Banstead, Surrey SM7 2LH

A large number of voluntary organizations provide registered residential and holiday programmes, give support to the official organizations and supplement provision generally. One which has become increasingly involved in services to mentally handicapped children is Doctor Barnardo's. Its North West District (7 Lineside Close, Liverpool L25 2UD) has pioneered in placing children with severe mental and physical disabilities with foster families in the community.

RESEARCH

Research is carried on or supported financially by the Department of Health and Social Security and the Department of Education and Science, by many universities and other organizations. Some of these are:

British Institute of Mental Handicap
Wolverhampton Road
Kidderminster, Worcs. DY10 3PP

National Foundation for Educational
Research in England and Wales
The Mere, Upton Park, Slough, Bucks.

Medical Research Council
20 Park Crescent, London W1

National Children's Bureau
8 Wakley Street
London EC1V 7QE

Centre for Studies in Integration
in Education
16 Fitzroy Square, London W1P 5HQ

Kennedy Galton Center for Mental
Handicap Research and Diagnosis
Harperbury Hospital,
Radlet, Herts.

Hester Adrian Research Center
Department of Education
The University
Manchester M13 9PL

Joseph Rowntree Memorial Trust
Beverley House, Shipton Road
York YO3 6RB

Department of Mental Health
University of Bristol
41 St. Michael's Hill
Bristol BS2 8DZ

Personal Social Services
Research Unit
University of Kent
The University
Canterbury, Kent CT2 7NF
(Evaluation of government
sponsored pilot projects in
community care)

PUBLICATIONS

Mental Handicap Research - published quarterly by the British Institute of Mental Handicap.

Journal of Mental Deficiency Research - (Quarterly). Published by MENCAP.

Special Education - quarterly journal of the National Council for Special Education.

British Journal of Mental Subnormality - published twice a year by the British Society for the Study of Mental Subnormality.

Educational Research - published by the National Foundation for Educational Research in England and Wales.

Health Services Journal - Macmillan Publishers.

Community Care - journal of Social Work.

Parent's Voice - quarterly journal of MENCAP

CMH Newsletter - Quarterly publication of the Campaign for People with Mental Handicap.

CBR News - Disability Unit, AHRTAG, the Appropriate Health Resources and Technologies Action Group, 1 London Bridge Street, London SE1 9SG.

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Casefinding, diagnosis and assessment, consultation to parents - Early identification of mental handicap may be made by consultants, general practitioners, midwives or health visitors; most babies are seen at maternal and child welfare clinics. When such preliminary identification is made, proper diagnosis should be the responsibility of a multidisciplinary assessment team made up of specialists. Parents may request examination by the Local Education Authority at any time after their child's second birthday. Much educational assessment is done in nursery schools and within the first school years.

Education - Since 1971 local education authorities are responsible for the education of all mentally handicapped children, however seriously handicapped they may be. Special education can be provided from the age of two. Decision on placement, whether special school (day or boarding), or for special class or unit in ordinary school, is made after collaboration with teachers, medical officers, and an educational psychologist, and after consultation with the parent. Each school has a considerable degree of autonomy as to curriculum, according to the needs of the individual children and the local circumstances. At the secondary stage schools place emphasis on preparation for life and work after leaving school, with free vocational training. The minimum statutory leaving age in special school is 16. In principle, school integration is an accepted goal; in practice, it is being carried out only very gradually. However, increasing numbers of young adults are enrolling in continuing education courses in community college programmes.

Work training and employment - During the final years and after leaving school the Careers Service provides special services for persons who are handicapped. Some go into employment, open or sheltered, when they leave special schools; others go to Adult Training Centers (sometimes called Social Education Centres) provided by local authorities, which offer not only work training but also social training and further education. In addition to sub-contract work for local industry, a centre may have its own production line, or service (as Applejacks Café) or, less frequently, may be able to place people in supported jobs as is the case through MENCAP's Pathway Employment Service.

Medical care - is given under the National Health Service through hospital consultant services, generally by referral from the general practitioner, or by the general practitioner.

Residential care - A large but decreasing proportion of residential care is supplied through traditional large mental handicap hospitals; (a few have been closed down). In 1985 they provided a total of about 48,000 places: Regional and District Health Authorities in cooperation with local authorities and voluntary societies are developing, as an alternative to the traditional all-purpose hospital, a system of community-based homes providing support for the range of needs of people with mental handicap.

Financial assistance - All educational advisory and medical services are provided free. Social security benefits are provided to meet various contingencies that can arise through mental handicap, including attendance allowance for people in need of a great deal of care and attention, and mobility allowance for people unable or virtually unable to walk. From April 1988 a new system of income suport (including the Social Fund) has been introduced to replace the previously complex range of Supplementary Benefits.

Recreation - Programmes provided by local authorities are supplemented by activities sponsored by MENCAP and its local branches. Most notable are its holiday and short-stay homes, and the network of Gateway Clubs which furnish leisure time programmes to adolescents and adults.

Research - Research in mental retardation has a long tradition in England, both in the biological and behavioral sciences. Major research centers are listed above.

Personnel training - The training of health visitors and social workers is organized on a non-specialist generic basis; their training courses include instruction on the needs of mentally handicapped people. Teachers in special schools follow either a degrees course followed by post-graduate training, or a 3 to 4 year special course; or an ordinary teaching course followed by experience in ordinary schools and in-service training of field social workers and day service staff.

Future Planning - In the autumn of 1988 the Government will respond to a number of critical reports about the progress made so far on developing successful community services. The future of long term government support in this field still remains in question.

OTHER INFORMATION FOR VISITORS

Information for visitors can be obtained from

Department of Education and Science
Elizabeth house
39 York Road
London SE1 7PH

British Council
10 Spring Gardens
London SW1A 2BN

Department of Health and Social Security
Elephant and Castle
London SE1 6BY

MENCAP/Royal Society for Mentally Handicapped Children and Adults
117-123 Golden Lane
London EC1Y ORT

School holiday periods vary in different parts of the country. In general the main periods are July to early September, mid-December to early January, two weeks in March or April.

WALES

The population of Wales was 2,814,000 according to a 1985 estimate. About a quarter of the people are bilingual; there are still parts of the country where children speak only Welsh until they go to school. Health services are provided by 9 Area Health Authorities. Although England and Wales are generally considered as one unit for administrative purposes, the Welsh Office does have some autonomy in policy development, as demonstrated by the production in 1983 of the All Wales Strategy for the Development of Services for Mentally Handicapped People. This document has provided considerably greater leadership towards progressive community based services in Wales than exists in either England or Scotland.

Although services in Wales remain patchy, they do seem to be advancing more rapidly and coherently than elsewhere in the UK. A pioneering model of community services based on individual needs was carried out by NIMROD (New Ideas for the Care of Mentally Retarded People in Ordinary Dwellings), starting in 1977 in Cardiff, supported by the Welsh Office (the Mental Handicap in Wales Applied Research Unit), the Health Authority, and the South Glamorgan County Council, in collaboration with the City Council, and handed over to the County Council after seven years. The close and valuable working relationship between service and research staff provided unique documentation of this project.

Relevant addresses in Wales:

All Wales Strategy for the Development of Services
for Mentally Handicapped People
The Welsh Office, Social Work Service
Cathays Park
Cardiff CF1 3NQ

Research: Mental Handicap in Wales Applied Research Unit
St. David's Hospital
Cardiff CF1 9T2

Education: Welsh Office, Education Department, Schools Division
Cathays Park
Cardiff CF1 3NQ

Coordination:

Wales Council for the Disabled
Crescent Road
Caerphilly, Mid-Glamorgan

Welsh Joint Education Committee
245 Western Avenue
Cardiff CF1 2YX

Citizen: MENCAP in Wales
31 The Parade
Cardiff CF2

Work: UK National Office
Pathway Employment Service
31 The Parade, Cardiff CF2

SCOTLAND

Scotland (population 5.3 million) is represented in the British House of Commons by 71 Members of Parliament, but has separate Government Departments and Local Government legislation. Its executive on the British Cabinet is the Secretary of State for Scotland. There are historically based unique differences in its system of Law, Judiciary, Education, Local Government, and national Church. Official languages are English and Gaelic.

Health services are provided by 18 Area Health Boards, while Education and Social Work are the responsibility of 11 Regional and Island Authorities. National legislation lays down principles for these services, but there is considerable scope for local variation. A number of voluntary bodies are involved in social, and to a lesser extent, education services.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Scottish Education Department
New St. Andrews House, Edinburgh EH1 3SY.

Social Work Services Group
43 Jeffrey Street, Edinburgh EH1 3DN.

Department of Employment,
Pentland House, 47 Robb's Loan, Edinburgh EH14 1UE.

Scottish Home and Health Department,
St. Andrews House, Edinburgh EH1 3DE.

Department of Health and Social Security
Argyle House, 3 Lady Lawson Street, Edinburgh EH3 9SH.

NATIONAL PLANNING AND COORDINATION

The Secretary of State for Scotland or his subordinate Minister concerned with the Health and Social Services, is concerned with national planning. The current Government (1985) has deliberately distanced itself from the centralized planning of services, such planning being left to Local Authorities and Health Boards. There is virtually no central involvement in planning and practice guidance. Again these are a matter for local democracy.

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

Professional

British Institute on Mental Handicap, Wolverhampton Road, Kidderminster, Worcestershire DY10 3PP.	BIMH is an organization covering the whole of the U.K. with separate divisions concerned with Scotland.

Centre for Studies in Mental Handicap,
c/o Mrs. S. Winter, Gogarburn Hospital
Glasgow Road, Edinburgh

The Centre promotes multi-disciplinary work.

Citizens

Scottish Society for the Mentally Handicapped,
13 Elmbank Street, Glasgow G2 4QA.

Founded in 1954, the Society has 80 branches, with a membership of about 6,500. The Society aims to provide direct services for mentally handicapped people and their families, both to enhance the quality of life of families and to pioneer new areas of service. The view of the Society is that essential services should be provided by Central or local Government, and much of its activity is directed to maintaining contacts and pressure towards this end. It is a member of the International League of Societies for Persons with Mental Handicap.

Including Mental Retardation

Association for Special Education - See England

Scottish Council on Disability, Princes House
5 Shandwick Place, Edinburgh.

RESEARCH

The Research Division of the Scottish Education Department and the Scottish Home and Health Department include projects on mental retardation, as do various University departments. In 1985 the Scottish Society for the Mentally Handicapped initiated the establishment of a Chair in Learning Difficulties at St. Andrew's University. Research projects are also conducted by the:

Scottish Council for Research in Education
Dr. Brian Dockeral, Director,
Moray House College of Education
Holyrood Road, Edinburgh 8.

PUBLICATIONS

Journals - include articles by Scottish contributors -

Journal of Mental Deficiency Research - published by the Royal Society for Mentally Handicapped Children and Adults.

Mental Handicap Research - published by the British Institute on Mental Handicap.

The Scottish Society for the Mentally Handicapped publishes a periodical newsletter.

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Obligatory prenatal care serves practically all pregnant women and there is obligatory medical care for newborns and infants, as for all children. All newborn infants are screened for phenylketonuria and for neonatal hypothyroidism. Early case finding in general takes place in pediatric facilities, later in school and adolescents' health services which are free for all children and adolescents. For more complete examination for purposes of diagnosis, treatment and assessment (from the medical, psychiatric, social and often pedagogical point of view) children are sent to Child Psychiatric Out - (or In) - patient clinics. Biochemical and chromosomal examinations are available in pediatric clinics of medical facilities. Pedagogical diagnosis is also made in special children's observation homes. Diagnosis of social adjustment of moderate and severely retarded individuals is made in the regional special consultation centres under the social affairs administration.

Education - It is the duty of the local Education Authority to provide education for mentally handicapped children between the ages of 5 and 16, and if considered advisable, before and after that age. In practice, most severely handicapped children are admitted to school at a younger age. 1981 legislation extended the duties of local Education Authorities, requiring them to "record" children with special education needs, a process that offers rights to both parents and children. On the basis of this record, the local Authority must then provide suitable education, which at present is provided in schools appropriate to the level of handicap. Current policy indicates a trend towards integrated education (rather than traditional special education) and the emphasis given to parental rights by the current Government may also influence this.

As well as pre-school education in the formal education system, other departments may be involved in provision for pre-school children, as are many voluntary organizations. After the age of 16, as well as day care (see below) Education Authorities may provide further education in appropriate colleges, both in courses for that purpose and through evening classes or other means of informal further education.

Post-Education - The new Education legislation requires the Education Authority to set up a "Future Needs Assessment" before any child is due to leave school. This is not yet fully operational due to a lack of options for handicapped school-leavers. For most school-leavers, the only option is that of the Adult Training Centre, which aims to continue the process of education as well as providing the main form of day care for adults. Scotland has had a very high rate of unemployment for many years, and this obviously affects employment prospects for mentally handicapped people.

Medical Care - provided by the National Health Service, which is separately administered in Scotland, and provides services through Area Health Boards. General Practitioners provide the services to families, while specialist services are based in hospitals and clinics.

Residential Care - Scotland still suffers from the existence of a number of large hospitals which still dominate care of mentally handicapped people. There is a gradual move to reduce the size of these hospitals, but the current Government insists on replacing with other units. Residential schools for moderately and mildly handicapped children are provided for a few children with special needs, and some where geographical distances make day provision impossible. There are a number of schools run on independent philosophies, e.g. those run under the principles of Rudolf Steiner. Where mentally handicapped children require residential care, the practice nowadays is to provide foster or other family placements. In addition, there are a very small number of Homes for mentally handicapped children. Community residential care may be provided by Local Authorities or voluntary organizations, and there has been a considerable expansion of small, sheltered housing provision due to expansion by Housing Associations, both those with a special interest in mental handicap, and those with a different base but which are willing to provide special accommodation. In spite this expansion, the provision of residential accommodation for adult mentally handicapped people in the community is still far from adequate. A number of independent organizations providing care for mentally handicapped adults include some small village communities, some establishments run on the principles of Rudolf Steiner, and some provided by religious organizations.

Work Training and Employment - The provision of sheltered workshops in Scotland is extremely limited. It is to be hoped that a recent Government initiative - the Sheltered Placement Scheme, which effectively provides a subsidy to handicapped people employed by organizations concerned for disabled people in ordinary work places - will provide an increase in the opportunities for mentally handicapped people.

Financial Assistance - Education is a statutory responsibility of local authorities and they must meet the cost of education of the mentally handicapped in their own schools or those run by voluntary organizations. Similarly, Social Work Departments meet the cost of senior occupation centres and have wide-ranging powers to meet other costs (e.g. short-term care). The Family Fund provides assistance to families with severely handicapped children under 16, usually in the form of cash grants for specific objects (e.g. washing machines for families with incontinent children). Families with severely handicapped members may be entitled to Attendance Allowance where constant care is necessary. After the age of 16, handicapped people may receive Non-Contributory Invalidity Pension, and there is a range of benefits including Mobility Allowance and Supplementary Benefit that may be claimed. There are, however, still loopholes in the system.

Voluntary organizations are self supporting but may receive grants from Central Government Local Authorities.

The National Health Service (which includes all Mental Deficiency Hospitals) and Social Security payments are funded basically by local taxation - this may be said to hinder the development of community care.

Recreation

Voluntary organizations have an extensive programme, and this is supplemented by schools and centres. Included are clubs, both integrated and segregated; swimming; activity holidays; summer playschemes; and caravans for families.

Research - There are research projects on training and occupation centres, both statutory and voluntary, and adult training centres. Other studies deal with assertiveness in mentally handicapped people; the transition between school and adult life; the stabilization of behavior disturbances, adaptive behavior in mentally handicapped people, and their return to the community from institutional life; studies on Down's Syndrome, on strategies of withdrawal; the difference between psychiatric disorders and behavior disturbances, on using computer assistance diagnosis for language problems; dementia and its early indicators, chromosome disorders and fragile x syndrome; also the question of continued need for psychotropic drugs by persons with handicap after discharge from institutions.

The Chair in Learning Difficulties at St. Andrews, being funded initially by the Scottish Society for the Mentally Handicapped, is expected to undertake practical research into staff training, the learning process and improvements in service provision.

Personnel Training - The Central Council for Education and Training in Social Work is responsible for training for all staff other than medical or educational staff. Courses in residential and day care work have been organized at Further Education Colleges, including courses for instructors in adult centres. Teachers must be approved as primary teachers before completing a one-year course in special Education at a College of Education, and there is a course for assistants. Training for nursing staff is based on general nursing training, approved by the Scottish Home and Health Department, and is based in hospitals. Currently there is a proposal to provide a unified training for staff concerned with hospital and social work care.

OTHER INFORMATION FOR VISITORS

Information for professional visitors from abroad can be supplied on request by the Scottish Education Department, and by the Scottish Society for the Mentally Handicapped.

School Holidays - July and August, a fortnight during Christmas/New Year, and Easter.

NORTHERN IRELAND

Northern Ireland has a population of about 1.5 million. It is part of the United Kingdom and elects 17 members to the House of Commons.

Education for children between the ages of 5 and 16 years is compulsory and free. Educational, health and social security provisions are generally similar to those in England.

The introduction of the Mental Health Acts (Northern Ireland), 1948 and 1961, laid the legislative base for services for people suffering from mental illness and severely mentally handicapped people who have been ascertained as requiring special care. Under the 1961 Act a "person requiring special care" is defined as" a person suffering from arrested or incomplete development of mind (whether arising from inherent causes or induced by disease or injury) which renders him socially inefficient to such an extent that he requires supervision, training or control in his own interests or in the interests of other persons." Under the Health and Personal Social Services (Northern Ireland) Order 1972, the Department of Health and Social Services has a duty to promote the physical, mental health and social welfare of the people of Northern Ireland. The day to day provision and delivery of health and personal social services, including services for the mentally handicapped, is the responsibility of 4 Health and Social Services Boards.

Educationally subnormal children, capable of being taught in special schools or classes but not in need of special care are provided with education by five Education and Library Boards (the Education and Libraries Order 1972) under the control of the Department of Education. Since 1987 this responsibility includes all mentally handicapped children. They may be referred to the Health and Social Services Boards at the age of 16 if they are found to need further supervision and training because of social inadequacy.

RELEVANT GOVERNMENT AGENCIES

Department of Education
Rathgael House
Balloo Road, Bangor
County Down

The Education and Library Boards are required to provide efficient education throughout the three stages of the statutory system of public education - primary, secondary and further education.

Department of Health and Social Services
Dundonald House
Upper Newtownards Road
Belfast BT4 3SF

The four Health and Social Services Boards are responsible for the provision of health and personal social services in their respective areas:

Eastern Health and Social Services Board
12-22 Linenhall Street, Belfast

Western Health and Social Services Board
15 Gransha Park, Glooney Road
Londonderry BT47 1TG

Northern Health and Social Services Board
County Hall, 182 Galgorm Road, Ballymena
Co. Antrim BT42 1HN

Southern Health and Social Services Board
20 Seagoe Industrial Estate, Craigavon
Co. Armagh BT63 5QD

VOLUNTARY ORGANIZATIONS

Most local associations for the mentally handicapped are members of the

Royal Society for Mentally Handicapped Children and Adults (MENCAP)
Northern Ireland Region
Segal House, 4 Annadale Avenue, Belfast BT7 3JH

RESEARCH

The Clinical Institute
Royal Victoria Hospital
Belfast

Institute of Clinical Science
Queen's University of Belfast
Grosvenor Road, Belfast BT12 6BJ

Muckamore Abbey Hospital
1 Abbey Road
Muckamore, Antrim BT41 4SG

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - Action to have a person ascertained as requiring special care can be initiated by a number of people including the parents, general or consultant medical practitioners, and the professional staff of the Education and Library Boards and the Health and Social Services Boards. As soon as any handicap is suspected, a comprehensive assessment of the nature of the handicap and of the needs and problems of the handicapped person and his family is conducted by a multidisciplinary team of professionals, including where appropriate a paediatrician, a psychiatrist, a psychologist, social work and nursing staff and the family doctor. This multidisciplinary assessment is repeated at intervals as the mentally handicapped child or adult grows and develops.

Education - Special schools, as well as special classes in ordinary primary and secondary schools are provided for educationally subnormal children up to age 16 years by the Education and Library Boards. The Health and Social Services Boards formerly provided special care schools for the more severely mentally handicapped children who are taught basic social skills and simple work activities. However, from 1987 the education of mentally handicapped children became the responsibility of the Department of Education and Library Boards.

Work Training and Employment - Adult training centres, workshops and day centres provide social training, further education, occupational and recreational activity for mentally handicapped persons from the age of 16 years onwards. Those with suitable ability may progress to training in work habits, routine and basic skills. After a period of such training, the more able may be placed in sheltered employment or appropriate open employment.

Residential Care - Health and Social Services Boards provide mental handicap hospitals for mentally handicapped people who require specialist medical or nursing care. Housing and care for those mentally handicapped people who, for a variety of reasons, can no longer live in the family home and do not need the specialist services of a hospital are provided mainly in residential homes run by the Health and Social Services Boards. A few residential homes are also provided and run by voluntary organizations.

Recreation - Voluntary organizations and groups, including the very active Northern Ireland parents' associations, make a substantial contribution to the well-being of mentally handicapped people living in the community or in hospital accommodation by providing and assisting with recreational activities and holidays.

Research - Most of the medical and psychological research projects undertaken in causation and treatment areas have been in conjunction with research workers attached to the Queen's University, Belfast. Investigations are concerned with chromosomal abnormalities, metabolic disorders, psychological and sociological problems.

Education and Training of Personnel - Muckamore Abbey Hospital in association with the Northern Ireland College of Mental Health Nursing, offers courses leading to the enrollment and registration by the National Board for Nursing, Midwifery and Health Visiting for Northern Ireland. The training of teachers for schools for mentally handicapped children takes the form of courses, leading to an In-Service Bachelor of Education Degree or Degree with Honors with Electives in the Education of Mentally Handicapped or a Diploma in the Education of the Mentally Handicapped, provided by the University of Ulster at Jordanstown, Newtonabbey, Co. Antrim.

Planning - The Policy and Objectives Paper, published in 1978 by the Department of Health and Social Services, sets out the policy on services for the mentally handicapped in Northern Ireland. The theme of the paper is "normalisation" - the concept that all reasonable measures should be taken to try to ensure that mentally handicapped people are helped to attain their maximum potential and to live as independent a life as their handicap permits.

OTHER INFORMATION FOR VISITORS

Inquiries may be directed to the Mental Handicap Branch, Department of Health and Human Services, Dundonald House, Upper Newtownards Road, Belfast BT4 3SF.

School Holiday - 2 months in the summer (July until early September) and about 2 weeks at Christmas and Easter.

UNION OF SOVIET SOCIALIST REPUBLICS
U. S. S. R.

The Union of Soviet Socialist Republics, (1987 estimated population: 284 million) is a federation of 15 Union Republics within certain of which are further sub- divisions such as Autonomous Republics, Autonomous Regions and National Districts. The largest Union Republic, the Russian Soviet Federal Socialist Republic (RSFSR), has about 55 percent of the population of the Soviet Union and 76 percent of its territory. Moscow, the capital, has a metropolitan population of over 8.5 million.

Since 1930 education has been free and compulsory. The 8-year primary school (7 to 15 years) is followed by 3-year secondary school courses in preparation for entrance to a technical institute or university.

Social benefits for all workers include free health services, paid vacations, sickness insurance, pensions (including 3 types of disability pensions), and special benefits to mothers and children. Health services are extensively organized and very well staffed, with great emphasis put on preventive measures, particularly in services for children through a continuing program of screening, early diagnosis and treatment.

Leading Soviet authorities such as Professors G.E. Sukharea, M.S. Pevzner, V.V. Kovalev and others use the term oligophrenia to include only those forms of mental deficiency which arise as a result of intrauterine or early lesions of the central nervous system. This is differentiated from backwardness in mental development due to psychosocial or other causes. The organization of assistance to persons with oligophrenia and other forms of mental retardation (estimated at under one percent of the population) is based on the principles of compensating the deficiency to the utmost possible extent, promoting social rehabilitation, and preventing invalidity. It is organized under the direction of the following ministries:

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Health of the USSR
Director: Dr. A.A. Chourkin, Chief specialist in psychiatry
Rakhmanovsky per 3, Moscow 101431

Ministry of Social Affairs of the RSFSR
Management of homes for the aged and disabled
Director of the Department: V.I. Sheptun
162, ul. Shabolovka, dom 4, Moscow

Ministry of Education of the USSR, Main management of schools
Director of the Department: Yu. Yu. Ivanov
Zubovskaya pl., dom 4, Moscow

State Committee of the Council of Ministers of the USSR for Occupational and Technical Education
Sadova-Cukharevskaya ulitsa, dom 16, Moscow-16

All local agencies involved in rendering assistance to the mentally retarded are within the organizational structure of the ministries listed above.

Coordination: The coordination in rendering assistance to the mentally retarded is carried out through interdepartmental conferences and consultations.

Volunteer Organizations: Volunteer societies and private organizations concerned with assistance for the mentally retarded do not exist in the USSR. However, the participation of parents of mentally retarded children in the specialized programs is actively encouraged. Parents' Councils of the various children's facilities (schools and Children's Houses) meet regularly to find ways of assisting the teachers; parents are also represented on the Pedagogical Council of teachers of each program.

RESEARCH

The central scientific institution which coordinates and directs all scientific research in the field of medicine in the USSR is the USSR Academy of Medical Sciences. It includes the Scientific Board on Problems of Mental Health which comprises the commission on problems of mental retardation. This commission deals specifically with coordination and direction of the scientific research of mental retardation from the medical and medico-biological aspects. Professor V.V. Kovalev is the head of the commission (Moscow Psychiatric Research Institute, Poteshnaya 3, Moscow 107258).

The All-Union Scientific Society of Neuropathologists and Psychiatrists also participates in the coordination of the scientific research concerning mental retardation (President of the Society-Academician G.V. Morozov, Director of the All-Union Research Institute of General and Forensic Psychiatry, Kropotkinsky per. 23, Moscow 119034. The coordination of scientific studies concerning the medical aspects of the problem of mental retardation is also a province of the section for pediatric psychiatry of the All-Union Scientific Society of Neurologists and Psychiatrists (Chairman of the section - Professor K.A. Semenova, the head of the All-Union Scientific Centre on Restorative Treatment of Children with Cerebral Palsies, ul. Pelshe, 6, Moscow 117602).

The activity of the Scientific Society of Neuropathologists and Psychiatrists concerning the coordination of research in the field of medico-biological aspects of the problem of oligophrenia is carried out in a close cooperation with the Commission on Problems of the USSR Academy of Medical Sciences.

The scientific research in the pedagogical aspects is carried out in the Scientific Research Institute of Defectology of the Academy of Pedagogical Sciences, (Director T. A. Vlasova, ul. Pogodinskaya dom 8, Moscow) and also in the departments of psychopathology and logopedics of "defectology" schools of pedagogic institutes. Questions of social rehabilitation and occupational training are handled in the Central Research Institute of Employability and Work Organization of the Disabled, (ul. Ostriakova, dom 3, Moscow, 57).

PUBLICATIONS

Research studies on the problems of mental retardation are published in the "Zhurnal Nevropatologii i psikhiatrii imeni S.S. Korsakova" (Journal of Neuropathology and Psychiatry of S.S. Korsakov), the journal "Defectologiia" (published since January 1968) and in the collected publications of scientific research studies of the institutes listed above, in the works of the All-Union, All-Russian and Republic Scientific Societies of Neuropathologists and Psychiatrists, psychiatric-neurological hospitals, departments of psychiatry and psychopathology of the medical and pedagogical institutes. Frequently reports on conferences and work in other countries are included as e.g. in "The Special School", journal of the Scientific Research Institute of Defectology.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Casefinding, Diagnosis and Assessment, Consultation to Parents: Mental retardation in a number of forms (Down's syndrome, microcephaly, phenylketonuria, etc.) is already detected in the maternity hospitals and later both by teachers and instructors in the day nurseries, kindergartens, schools and by pediatricians and pediatric psychoneurologists. After the patient with suspected mental retardation is identified, he is seen by a pediatric psychoneurologist who decides whether oligophrenia is present, its etiology and clinical form. The consultation examination of mentally retarded children is done by pediatric psychoneurologists in pediatric polyclinics and psychoneurological dispensaries. Medical-genetic consultations detect forms of oligophrenia due to genetic factors, measures are taken for prevention of oligophrenia in the progeny and appropriate advice is given to the couples.

Education and Vocational Training: Pre-school education and preparation for training in a special school is provided by specialized day nurseries/kindergartens. The school education is insured by a wide net of special (auxiliary) schools. More than 90 percent of all special schools for handicapped children are boarding schools. The duration of education in these schools is 8 years; staffing ratios are generally high, with a special teacher and 2 trained assistants ("up-bringers") for each class. In the course of education the children learn simple occupations and are then prepared for work. In addition, some occupational and technical schools have special groups for work training. Such training of retarded adolescents with more pronounced intellectual disorders and mental deficiencies is carried out in occupational therapy workshops of the dispensaries. It should be pointed out that education is provided by specially trained teachers not only for the boarding and day schools for debiles (mildly retarded) under the Ministry of Education, but also for the special babies' homes and creche-kindergartens under the Ministry of Health as well as the residential Children's Houses for imbeciles and idiots (moderately and severely retarded) under the Ministry of Social Affairs.

Employment: Mentally retarded persons with a deficiency of a mild degree (oligophrenia in the degree of debility) who completed special school and occupational technical schools are prepared in general for work in basic industries and agriculture. The more severely handicapped are employed in productive work in sheltered programs (including industrial and farm work).

Medical Care: Medical assistance, depending on the disorder (general somatic, neuropsychiatric and the like), is rendered both in the treatment centers of the general medical service (in polyclinics, hospitals, etc.), by various specialists (therapeutists, pediatricians, surgeons, etc.) and in psychoneurological dispensaries, hospitals and occupational therapy workshops.

Residential Care: Is provided in psychiatric hospitals of the public health service and in the homes for the disabled maintained by the Social Affairs agency (Children's Houses and Homes for Invalids). In the psychiatric hospitals these patients receive various kinds of treatments, principally drug therapy, physiotherapy and physical therapy. In the homes for the disabled the main role belongs to the complex of measures including education, special training and social and work adjustment.

Financial Assistance: Medical and educational services are free. Parents make a contribution towards residential costs for children under 18, based on monthly income, with free care for children of unmarried mothers, widows, invalids, etc.

Recreation: Recreation for the persons with mental retardation is provided at the place of their established residence, and includes various cultural and sport measures, social groups and the like.

Research: The principal trends of the investigation of the problem of mental retardation include the study of the medico-biological nature (etiology and pathogenesis) of oligophrenia, diagnosis and clinical study of its various forms, elaboration of preventive and therapeutic methods, questions of social rehabilitation, including general and occupational training, education and study of the psychology of the mentally retarded persons. There is a very close link between research and practice.

Personnel Training: Training of personnel is carried out in the medical schools that train auxiliary medical personnel for psychiatric institutions. Psychiatrists and psychoneurologists who work in the institutions for the mentally retarded are trained in large psychiatric hospitals and in special courses in the department of pediatric psychiatry of the Central Institute for the Advanced Training of Physicians. Training of defectologists, teachers who work with handicapped children, is specialized with regard to the type of handicap, those who teach mentally retarded children being also qualified in speech therapy (logopedics). Preparation may be in a 5-year subsidized course at a Pedagogical Institute or Faculty of Defectology, or part time for already qualified teachers. Theory is closely linked with practical work in the school.

Salaries for special teachers are higher than in ordinary schools. There is still a shortage of qualified defectologists. Trained child care workers ("upbringers" or "éducateurs") are responsible for extracurricular programming and are also employed as classroom auxiliaries. Most are trained at the level of a primary school teacher.

OTHER INFORMATION FOR VISITORS

The foreign relations offices of the Ministry of Health and the Ministry of Education are the main authorities which regulate communication between Soviet and foreign specialists in the field of mental retardation. Requests for information or for arrangements for an official visit should be addressed to these agencies either directly by mail or through the Soviet Embassy in the county concerned. All travel arrangements are made through INTOURIST.

School Holidays: In the USSR are approximately November 4 - 9; December 30 - January 10; March 25 - April 1; June 20 - August 31.

UNITED STATES OF AMERICA
U.S.A.

The United States of America is composed of 50 sovereign states, each with its own legislature and state administration, presided over by an elected governor. While certain governmental activities are reserved for the federal government, human services, such as those in the field of mental retardation, are essentially organized by each state, and the result is a wide variation in the name and function of the relevant state agencies. Since the 1930s, the federal government has intensified the support of a growing network of services and subsidies to the states in the area of health, education, rehabilitation, and social services.

The estimated U.S. population is now 247.9 million. An annual summary of social, political and economic information is published in the Statistical Abstract of the United States, available from the Superintendent of Documents, Government Printing Office, Washington,D.C. 20402.

Effective planning for services to persons with mental retardation had its roots in the post-World War II emphasis on rehabilitation and the dignity and worth of the individual human being, and was spearheaded by the National Association for Retarded Children, founded in 1950. In 1961 President John F. Kennedy appointed a Panel on Mental Retardation which submitted to him in October 1962 A Proposed Program for National Action to Combat Mental Retardation.

During the following decades there have been dramatic changes in the field of mental retardation. Principles such as "integration in school and community," "least restrictive environments", "developmental models," "coordination of programs," and "human and legal rights" have been developed by consumer advocates and leading professionals in the field of mental retardation, and have guided public policy. Beginning with the introduction and now mandatory application of the Guthrie test, research for further preventive measures has gained high priority.

Private and public industries and agencies are beginning to recognize that citizens with mental retardation are an economic resource. The emphasis has been on ability and not disability, potential and not limitation, strength and not weakness, community integration and not social and physical isolation, a positive attitude towards citizens with mental retardation and not the traditional misconception, i.e., "out of sight, out of mind." During the next decade rising emphasis will be placed on employment opportunities for persons with severe mental retardation, community integration, independent living environments, and public acceptance of people with mental retardation as rightful members of American society.

Parents' groups have been a major force in advocating the rights of citizens with mental retardation and stimulating the development of improved services. Their governmental affairs offices (see e.g. listing under ARC/US) monitor legislative, regulatory and administrative programs and play an important information and advisory role to government.

Developmental Disabilities Programs

Concern over the fact that federal appropriations did not keep pace with increasing service demands and increasing costs, as well as concern over the "splintering" of services," led in 1970 to federal legislation introducing a new service category "Developmental Disabilities" (DD), i.e. conditions arising during the developmental period. Initially, it focused on mental retardation, cerebral palsy, epilepsy and later autism. It was subsequently expanded to include all severe disabilities originating before age 22.*

In 1987, the Developmental Disabilities Act was further amended to focus on the ability of individuals with developmental disabilities to reach their maximum potential through increased independence, productivity, and community integration. The legislation mandated a new priority service area, employment related activities.

The Act now encompasses four major program areas:

Basic State Grants

These federal grants are awarded through the Administration on Developmental Disabilities (ADD) to State Developmental Disability Planning Councils, appointed by each state governor, to prepare and submit annual Comprehensive State Plans. The Councils consist of representatives of major public and private agencies, including health, welfare, education, MR/DD, aging and Medicaid; at least half of each Council is made up of persons with disabilities, their parents, guardians, or other relatives.

The Act specifies that at least 65% of the state grants must be used for priority areas such as employment, community living, child development and case management or other priority areas defined by the state. The Councils may also use these funds to provide seed money for innovative programs, to conduct research and demonstration, and in other ways strengthen the service system.

For information write to: National Association of Developmental Disabilities Councils (NADDC) 1234 Massachusetts Avenue, N.W., Washington, D.C. 20005.

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* To avoid confusion it will be helpful for readers of U.S. reports and professional literature to keep in mind that the concept of developmental disabilities was introduced at a time when, for various reasons, there was growing objection to the term mental retardation. This has led to occasional confusing language usage: some people now say routinely "MR/DD," others say correctly "mental retardation and other developmental disabilities," while some avoid the term mental retardation altogether and use exclusively "DD" even when speaking only of mental retardation.

Discretionary Grants Program

Funds are awarded by ADD to support projects of national significance.

University Affiliated Programs (UAP)

ADD makes awards to universities to establish and maintain a nationwide network of University Affiliated Programs to carry out interdisciplinary training and conduct demonstration projects that are exemplary in nature. Their basic mission is to support the independence, productivity and integration into the community of all citizens with developmental disabilities. The UAP network is playing a significant role in shaping the system of service delivery in the U.S.A.

For information: American Association of University Affiliated Programs (AAUAP), 8605 Cameron Street, Silver Spring, Maryland 20910.

Protection and Advocacy Programs (P&A)

Protection and Advocacy funds are used to advocate for the rights of persons with developmental disabilities and to assist in assuring that the appropriate services are provided. For this purpose each state governor designates an independent agency that provides no other direct services to disabled people. P & A agencies deal both with individual cases and with systems advocacy, i.e. efforts to change service patterns and regulations that tend to interfere with the rights of individuals who have developmental disabilities.

For information: National Association of Protection and Advocacy Systems (NAPA) 300 I Street N.E., Washington, D.C. 20002.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

There are two Federal Departments with major administrative responsibility:

DEPARTMENT OF HEALTH AND HUMAN SERVICES (DHHS)

OFFICE OF HUMAN DEVELOPMENT SERVICES (OHDS)

Administration on Developmental Disabilities (ADD)
Hubert H. Humphrey Building
200 Independence Avenue, S.W.
Washington, D.C. 20201

SOCIAL SECURITY ADMINISTRATION (SSA)

Office of Disability
6401 Security Boulevard
Baltimore, Maryland 21235

Supplemental Security Insurance (SSI)
Social Security Disability Insurance (SSDI)
Social Security Survivors' Insurance

HEALTH CARE FINANCING ADMINISTRATION (HCFA)
Hubert H. Humphrey Building
200 Independence Avenue, S.W.
Washington, D.C. 20201

Medicare and Medicaid (medical insurance)

DEPARTMENT OF EDUCATION (DOE)

OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES (OSERS)
Mary E. Switzer Building, Room 3060
330 C Street, S.W.
Washington, D.C.

Office of Special Education Programs (OSEP)

Rehabilitation Services Administration (RSA)

The following three bodies, appointed by the President, have national prominence in providing leadership, promoting coordination and information exchange:

President's Committee on Mental Retardation (PCMR)
Wilbur J. Cohen Federal Building, Room 4723
330 Independence Avenue, S.W.
Washington, D.C. 20201

President's Committee on Employment of Persons with Disabilities (PCEPD)
636 Vanguard Building
1111 20th Street, N.W.
Washington, D.C. 20036-3470

National Council on Disability (NCD)
800 Independence Avenue, S.W., Suite 814
Washington, D.C. 20591

VOLUNTARY ORGANIZATIONS

With primary concern in mental retardation

Association for Retarded Citizens of the United States (ARC/US)
National Headquarters: 2501 Avenue J
Arlington, Texas 76006

Founded in 1950 as the National Association of Parents and Friends of Mentally Retarded Children, by representatives of numerous local and state parent groups formed during the 1940s, NARC rapidly became a powerful national voice for a long neglected minority. While its local groups were primarily concerned with the development of services, the national association (and in many cases, the state associations) successfully fought for legislative changes and fiscal support. ARC/US (the phrase "retarded citizens" was substituted for "retarded children" in 1974) today has over 160,000 members in 1300 state and local associations. It maintains a Governmental Affairs office at 1522 K Street, N.W., Washington, D.C. 20005. The ARC's primary goal is full integration of persons with mental retardation in the community, including community schools. Member of the International League of Societies for Persons with Mental Handicap since 1962.

American Association on Mental Retardation (AAMR)
1719 Kalorama Road, N.W.
Washington, D.C.

Founded in 1876 as an association of superintendents of residential institutions, it is now the largest professional organization, with 9000 members representing all aspects of the field. There are 14 Divisions in AAMR: Administration, Communications Disorder, Community Services, Education, General, Legal Process and Advocacy, Medicine, Nutrition and Dietetics, Psychology, Recreation, Religion, Social Work, Vocational Rehabilitation. Its annual conferences and two publications, The American Journal on Mental Retardation and Mental Retardation, have provided continuous interchange of information on significant developments. AAMR was a founding member of the International Association for the Scientific Study of Mental Deficiency (IASSMD).

National Down Syndrome Congress (NDSC)
1800 Dempster Street
Park Ridge, Illinois 60068-1146

With 10,000 parent and professional members, this organization has done outstanding work in correcting negative attitudes and promoting greater opportunities for individuals with Down Syndrome.

National Association of Private Residential Resources (NAPRR)
4200 Evergreen Lane, Suite 315
Annandale, Virginia 22003

Organized in 1970, the association brings together administrators of 650 private facilities with large and small programs including boarding schools, group homes and other kinds of community living.

National Association of State Mental Retardation Program Directors (NASMRPD)
113 Oronoco Street
Alexandria, Virginia 22314

Established in 1963, this organization facilitates the exchange of information between the states and represents the interests of the state administrators vis-a-vis the federal government.

The Joseph P. Kennedy, Jr. Foundation
1350 New York Avenue, N.W.
Washington, D.C. 20005

The Foundation was established by the Kennedy family in 1946 to support facilities for the study of mental retardation and its clinical treatment; more than a dozen university programs have been assisted as well as scholars in bio-and medical ethics. In recent years the

Foundation has supported special projects exploring the needs of older and aging persons with mental retardation. Its International Awards honor men and women who have made outstanding contributions in scientific research, leadership and service. The Foundation also initiated the program of Special Olympics (see entry on Recreation under Brief Descriptive Notes on Program Areas).

Related Organizations

Cerebral palsy and epilepsy were included in the original 1970 definition of Developmental Disabilities, with autism added in 1975. The following three citizen organizations represent these fields:

United Cerebral Palsy (UCP)
66 East 34th Street
New York, NY 10016

Epilepsy Foundation of America (EFA)
4351 Garden City Drive
Landover, Maryland 20785

Autism Society of America (ASA)
1234 Massachusetts Avenue, N.W.
Washington, D.C. 20005

Association for Children and Adults with Learning Disabilities (ACALD)
4156 Library Road
Pittsburgh, Pennsylvania 15234

Different from other countries, in the United States the phrase "learning disability" signifies a condition which is different from mental retardation, hence some experts prefer the term "specific learning disabilities," e.g. dyslexia. The Association has seen a rapid growth in the last 15 years.

The Association for Persons with Severe Handicaps (TASH)
7010 Roosevelt Way, N.E.
Seattle, Washington, 98115

TASH is a multidisciplinary "action" organization with strong commitment to educational and community integration of the often neglected individuals with major disabilities.

The Council for Exceptional Children (CEC)
1290 Association Drive
Reston, Virginia 22091

CEC was founded in 1922 to advance the education of exceptional children, both handicapped and gifted. Membership includes largely teachers, but also psychologists, administrators and parents.

National Therapeutic Recreation Society (NTRS)
  of the National Recreation and Park Association (NRPA)
3101 Park Center Drive
Alexandria, Virginia 22302

Concerned with all disabilities, this organization advocates for integrated leisure activities.

National Association for the Dually Diagnosed (NADD)
110 Prince Street
Kingston, NY 12401

This is a recently formed professional association that seeks to improve services for persons whose diagnosis includes both mental retardation and mental illness.

RESEARCH

Information can be provided by the following federal agencies (see also item under Brief Descriptive Notes):

Mental Retardation and Developmental Disabilities Branch
National Institute of Child Health and Human Development (NICHD)
National Institutes of Health
Department of Health and Human Services
Bethesda, Maryland 20892

National Institute on Disability and Rehabilitation Research (NIDRR)
Office of Special Education and Rehabilitative Services (OSERS)
Department of Education
330 C Street, S.W.
Washington, D.C. 20202

PUBLICATIONS

American Journal on Mental Retardation, bi-monthly, Mental Retardation, quarterly	American Association for Mental Retardation
the arc, bi-monthly arc Government Report, semi-monthly	Association for Retarded Citizens of the United States
Exceptional Children, bi-monthly Education and Training of the Mentally Retarded, quarterly	The Council for Exceptional Children
Journal of the Association of Persons with Severe Handicaps, quarterly TASH Newsletter, monthly	TASH
LINKS - Living in New Kinds of Situations, monthly	The National Association of Private Residential Resources
Down Syndrome NEWS, quarterly	National Down Syndrome Congress
The Exceptional Parent, bi-monthly practical guidance for parents of children with disabilities	Psy-Ed Corporation 1170 Commonwealth Avenue Boston, MA 02116

All of the organizations and agencies listed in this report have special annual reports or quarterly publications. In addition, most associations and agencies listed publish newsletters which carry significant, albeit specialized, information.

NATIONAL INFORMATION SERVICE CENTERS

Directories and information services are becoming increasingly available in computerized form, provided by a variety of voluntary and governmental agencies and organizations such as the following:

National Information Center for Handicapped Children and Youth (NIHCY)
7926 Jones Branch Drive, Suite 1100
McLean, Virginia 22102

Clearinghouse on Disability
Office of Special Education and Rehabilitative Services
Department of Education
Mary E. Switzer Building, Room 3132
330 C Street, S.W.
Washington, D.C. 20201

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case finding, diagnosis and assessment, consultation to parents - The timely provision of appropriate and adequate health care is a primary concern for all children with mental retardation and other developmental disabilities.

Beginning in 1956, federal grants to states under the Crippled Children's and Maternal and Child Health Programs have supported mental retardation clinics (child development clinics), now numbering over 150. The clinics are outpatient medical facilities providing comprehensive evaluation, counseling, treatment, and follow-up services primarily to children suspected of or diagnosed with mental retardation, and their families.

There are also specialized clinics in each state such as treatment centers for metabolic disorders, and comprehensive clinical genetic service centers. Parent-to-parent counselling has been an important function of many voluntary organizations.

Education - The provision and funding of educational programs for children with disabilities is primarily a responsibility of local and state government, subject to certain basic federal mandates. The Education for All Handicapped Children Act, passed by Congress in 1975 and known as P.L. 94-142, has been a landmark piece of federal legislation. It has fundamentally changed the educational system in the United States, guaranteeing a free and appropriate public education to the nation's 4 million handicapped children from 3-21 years old, in a least restrictive environment. The Act further emphasizes the Individualized Educational Plan (IEP) for each student.

In recent years the Office of Special Education and Rehabilitative Services (OSERS) has been programming for transition of youth with disabilities from school to workplace. Several of the states have introduced "Turning 22" legislation to facilitate the transition, but there are still many young people on waiting lists.

Work training and employment - Currently, work training and placement for mentally retarded persons is authorized under the Vocational Rehabilitation Act of 1973, as amended, which provides federal funding and enforces federal standards. The amendment gives preference to persons with more severe handicaps. Most innovative in this area are supported work programs: instead of placement in a sheltered workshop, the individual is placed directly in a paid work situation with a job coach, with the government paying part of the wage. This program specifically includes persons with more severe handicaps, previously considered unemployable.

Medical care - There is no universal health insurance; health care is paid for through a combination of public (Medicare and Medicaid) and private health maintenance organizations or insurance programs. Some persons, however, do not have any health care insurance. Although financing varies, most children and adults with mental retardation receive their health care from community based physicians and other health care providers.

Residential services - During the past 20 years much change has taken place in the provision of residential services. The most important change has been the decreasing population of the large state mental retardation institutions, from 254,500 persons in 1967 to about 95,000 in 1987, continuing at a rate between four and five thousand per year. There has been a corresponding increase in a variety of residential arrangements in the community, group homes, single and clustered apartments, individual boarding or foster homes, enabling mentally retarded and other developmentally disabled persons to live in the community. Some families are making it financially possible for their adult son or daughter to live in their own apartments or a shared home with friends.

Financial assistance - The Social Security Administration is the principle conduit of federal funds. Disabled people with little or no income receive Supplemental Security Income (SSI) in monthly payments that vary in accordance with each individual's eligibility conditions.

Social Security Disability Insurance (SSDI) provides monthly benefits for workers (and eligible members of their families) who become disabled, and are based on the length of time they have paid Social Security taxes.

Adult Disabled Child Benefit Program (ADCB) - Developmentally disabled children are eligible for benefits (payable at age 18) when a working parent becomes disabled, retires or dies. They are referred to as childhood disability benefits because the son or daughter must have become disabled before reaching age 22.

The federal involvement in financing mental retardation and developmental disabilities services expanded significantly with the enactment of the Medicaid program in 1965. Most significant is the Intermediate Care Facilities Program for the Mentally Retarded (ICF/MR), established in 1971. It provides federal monies for upgrading the physical environment and quality of care in state residential institutions. Its standards for active treatment and individualized habilitation plans have been major factors in the shift from custodial care to developmental programs in public institutions. It also permitted ICF/MR certification of small community-based facilities (15 beds or less).

Recreation - Recreation programs have been a significant part of the services provided by non-governmental organizations. Summer day camps and leisure-time programs, for example, were often among the first programs started by parents' associations and youth organizations. Scouting (and Camp Fire) have included retarded youth, both in integrated as well as separate groups (as in residential institutions). Increasingly, recreation facilities serving the general public are open to people with mental retardation.

Since the 1960s, the Joseph P. Kennedy, Jr. Foundation has sponsored the Special Olympics for Retarded Children and Adults, involving local, state, regional, national and now international competition and participation. A new program of the Foundation is called "Families Play Together."
The address is: Special Olympics International
1350 New York Avenue, N.W.
Washington, D.C. 20005.

Research - In addition to the Mental Retardation and Developmental Disabilities Branch of the National Institute of Child Health and Human Services (NICHD) and the National Institute on Disability and Rehabilitation Research (NIDRR) (see address listing above), there are twelve Mental Retardation Research Centers across the country, initiated under federal legislation (P.L. 88-164 of 1963) emanating from the recommendations of President Kennedy's Panel on Mental Retardation. All these centers are engaged in both biomedical and behavioral research, and have become a network that "serves as the nation's core to further understanding, treatment and prevention of mental retardation." A listing of these centers is available from NICHD. Research relating directly or indirectly to MR/DD is also being carried on by numerous universities and other public and private agencies.

Personnel training - Over 500 colleges and universities offer specialized programs leading to undergraduate and graduate degrees in the education and training of people with disabilities. These programs are partly funded by the Office of Special Education Personnel Development, Office of Special Education and Rehabilitative Service (OSERS), Department of Education.

Innovative training programs with an interdisciplinary focus are offered through the University Affiliated Programs (UAPs) bringing together the disciplines of education, psychology, social work, vocational rehabilitation, nursing, medicine, law, and others, to train skilled specialists and practitioners. See address on page 292.

Specific short term training in many areas is regularly offered in conjunction with professional conferences or by private organizations; brief in-service training is usual, but there is still a surprising lack of training for direct service caregivers in residential services.

Standards, accreditation, monitoring - Quality control has been in the forefront of national thinking about mental retardation programs and services.

Beginning in 1979, as the Accreditation Council for Facilities for the Mentally Retarded and other Developmentally Disabled Persons (ACFMR/DD), and becoming in 1987 the Accreditation Council for People with Developmental Disabilities (ACDD), nine private organizations now jointly set standards, monitor performance and provide accreditation for services and facilities.
The address is: Accreditation Council for People
with Developmental Disabilities
8100 Professional Place, Suite 204,
Landover, Maryland 20785.

An organization with a wider focus, the Consortium for Citizens with Disabilities (CCD), brings together representatives of 57 member organizations, private, public, congressional committees and professional disciplines, to evaluate national program policy, assess the federal budget and appropriations relating to people with disabilities.
The address is: Consortium for Citizens with Disabilities
1522 K Street, N.W.,
Washington, D.C. 20005-1247.

While accreditation and licensing are mainly public responsibilities, monitoring is increasingly carried on by teams of volunteers, including persons with disabilities themselves, and members of disabled persons's families.

Planning - In 1963 under the Kennedy legislation, Congress for the first time authorized and appropriated funds to each state to develop, with broad citizen participation, comprehensive and coordinated state plans for services to persons with mental retardation. 1970 legislation, which introduced the concept of developmental disabilities, established the state Councils to develop planning and coordination of services, again prescribing citizen participation, and now including persons with disabilities.

Amended and new legislation through the following two decades has added new national and state responsibilities in the fields of education, legal protection, vocational rehabilitation, employment and research, stressing goals of independence, productivity and community integration.

Self-advocacy - A phenomenon of far reaching significance has been the growth of the so-called self-advocacy movement, i.e. the emergence of groups of persons with mental retardation whose purpose is to present their views, their needs and wants, and to bring about change in existing service patterns and attitudes. They are particularly concerned with establishing their civic rights, and with changing what they consider demeaning terminology. Under the name of People First, Speaking for Ourselves, and United Together, they have organized local groups and in some cases, also state associations, e.g in California, Nebraska, New York, Oregon, Pennsylvania, Washington. However, as yet there is no national organization. Representatives from several of the groups attended a 1988 international conference organized by a People First group of England; others have been enabled to be active participants in congresses of the ILSMH.

INFORMATION FOR VISITORS

Information in planning visits may be requested from:

The President's Committee on Mental Retardation (PCMR)
Washington, D.C. 20201 Telephone: (202) 245-7634

Association for Retarded Citizens of the United States (ARC/U.S.)
2501 Avenue J
Arlington, Texas 76006 Telephone: (817) 640-0204

School Holidays: Winter - approximately December 15 - January 5
Spring - usually before or after Easter Week
Summer - approximately June through August

URUGUAY

Uruguay is one of the smaller South American republics; its population of 3 million is almost wholly of European descent. The language and cultural backgrounds are Spanish with additional Italian influences. The metropolitan area of the capital, Montevideo, has about 1.3 million people.

Education, including college, is free and primary education is compulsory; the literacy rate is 95%.

Montevideo is the seat of the Instituto Interamericano del Niño [IIN] (Inter-american Children's Institute [IACI]), an agency of the Organization of American States. In 1965 it established a Sección Retardo Mental of which Dra. Eloisa García Etchegoyhen de Lorenzo was the long time chief. It was expanded to include pre-school and all special education concerns. Also functioning through the Institute is the PATH/IACI Resource Center (Partners Appropriate Technology for the Handicapped, Partners of the Americas).

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministerio de Educación y Cultura Reconquista 535 Montevideo	Ministry of Education and Culture
Administración nacional de Educación Pública (ANEP)	(National Administration of Public Education)
Consejo Directivo Central (CODICEN) Soriano 1045 Montevideo	(Central Directing Council)
Consejo Nacional Educación Primaria Bartolomé Mitre 1317 Montevideo	(Board of Elementary Schools)
Departamento de Educación Especial Juan Carlos Gómez 1416 Montevideo	(Department of Special Education)
Centro de Orientación y Diagnóstico San José 822 Montevideo	(Orientation and Diagnosis Center)
Ministerio de Salud Pública 18 de Julio 1892, Montevideo	Ministry of Public Health
Consejo del Niño 25 de Mayo 520 Montevideo	Children's Council to safeguard the health and welfare of mothers and young children.
Centro Nacional de Rehabilitación Psíquica Cubo del Norte 3717, Montevideo	National Center for Mental Rehabilitation (in coordination with the Ministry of Public Health)

Consejo Nacional de Asignaciones Familiares
San José 1132, Montevideo

Central Council for Family Allowances

VOLUNTARY ORGANIZATIONS

With Primary Concern in Mental Retardation

Professional

Asociación Uruguaya para el Estudio Científico de la Deficiencia Mental
Joaquín Suarez 3281, Montevideo

Uruguayan Association for the Scientific Study of Mental Deficiency

The Association was founded in 1967 and is member of the International Association for the Scientific Study of Mental Deficiency.

Citizen

Asociación Nacional pro Niño Retardado Mental (ANR)
Blanes 1250, Montevideo

National Association for Retarded Children

Founded in 1961, the ANR's membership consists of parents, interested citizens and professional workers. It is a member of the International League of Societies for Persons with Mental Handicap.

RESEARCH

Hospital de Clínicas "Dr. Manuel Quintela"
Centro Latinoamericano de Perinatología - CLAP
Ave. Italia s/n, Montevideo

Servicio Prescolar - Escuela de Recuperación Psíquica
No. 203
19 de Abril 1110, Montevideo

Instituto Magisterial Superior
Cátedra de Investigación
Ave. del Libertador Brig. Gral. Lavalleja 2025
Montevideo

PUBLICATIONS

Boletín de la Sociedad Uruguaya de Pediatría

Boletín de la Sociedad Uruguaya de Neurología

Boletín y Publicaciones del Instituto Interamericano del Niño y Centro de Recursos PATH/IACI-Uruguay

DIRECTORIES

The statistical section of the Council for Primary Education periodically publishes directories listing special schools and classes. Directories are also published by the Interamerican Children's Institute.

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consulting to Parents - Specialized diagnostic work is carried out in the University Hospital (Hospital de Clínicas "Dr. Manuel Quintela"). The special school for mentally retarded children, Escuela de Recuperación Psíquica No. 1 (now No. 203) provides a parent counseling service and assessment clinic for infants and preschool children as well as for school age children. A unique feature of this clinic is a home visitation and advisory service by a teacher with training in early child development.

Assessment and testing of school age children is the responsibility of the medical and psychological services of the Consejo Nacional de Enseñanza Primaria y Normal.

Education - Elementary schools in Montevideo and in the provinces have classes for borderline or slow learning children (Clases de Recuperación Pedagógica) and special schools for mentally retarded children (Escuelas de Recuperación Psíquica). Many of these special schools accept children of moderate and even severe retardation, although the majority are mildly retarded. A limited number of multihandicapped children are accepted in schools for children with other specific disabilities. Because the public school system in Uruguay began to accept mentally retarded children as early as the 1930's, relatively few private schools have developed. An exception is the day school program for very severely handicapped children run by the parents' association ANR. A new curriculum for the education of handicapped students based on current and new developments in the field, is being approved by national authorities.

Work Training and Employment - There is emphasis in the special schools on preparation for work, following the pioneering example of Mrs. Eloisa G. E. de Lorenzo, then Director of the Escuela de Recuperación Psíquica No. 203. Some pre-vocational training is given in regular classes followed by specific work training for older pupils and young adults. The staff is responsible also for social training, community job placement and follow-up. There are sheltered workshops for severely handicapped adults.

Residential Services - are limited. "Obra Morquio No. 205", one of the special public schools in Montevideo (Chapicuy 3756), which was started in 1947 as a private school, maintains a boarding home for a limited number of children. Other residential facilities for dependent children, including some retarded children, are under the auspices of the Consejo del Niño, which subsidizes the "Don Orione" Home, a private charity in a suburb of Montevideo. Also privately maintained by SARU (Servicio de Ayuda Rural del Uruguay) is a home for girls and women in Colón, "Hogar Margarita de Herrera," staffed by Spanish nuns. An undetermined number of severely retarded children and adults are under care in the overcrowded state mental institution, Hospital Vilardebo.

Recreation - Escuela de Recuperación Piquica No. 203 has pioneered in providing summer camping for all but its youngest (preschool) classes.

Research - A multidisciplinary cooperative investigation on the identification and development of high risk infants was undertaken by the Departments of Neurology, Obstetrics and Pediatrics of the Hospital de Clínicas (University Hospital) and the Escuela de Recuperación Psiquica No. 203. This led to the establishment of CLAP, the Latin American Perinatology and Human Development Center, sponsored by the Pan American Health Organization in cooperation with the University and the Ministry of Public Health. The Center is concerned both with research and interdisciplinary training programs.

In the field of education, the National Board of Education has set up CIDERM, a center for investigation, diagnosis and education techniques for mentally retarded children, one of whose areas is to translate behavioral research into feasible classroom techniques.

Personnel Training - Two-year courses in special education are available for qualified teachers with two years of general teaching experience.

Special education teachers receive a higher level of salary. Practicum courses are provided in the special schools. Consideration to the subject of mental retardation is given both by the School of Nursing and by the two schools of social work, as well as at the above mentioned CLAP.

OTHER INFORMATION FOR VISITORS

Requests for information and visits can be directed to the

Consejo Nacional de Educación Primaria
Bartolomé Mitre 1317
Montevideo

Asociación Nacional pro Niño Retardado Mental (ANR)
Blanes 1250
Montevideo

School Holidays - The summer vacation period is from December to approximately March 10. There is a two week winter holiday during July.

VENEZUELA

Venezuela is a democratic South American republic consisting of 20 states and the Federal District. It has an estimated (1987) 18.3 million people of European, Indian and African ancestry. The greater metropolitan area of Caracas has a population of 3 million; Maracaibo, the second largest city, 1 million people. The official language is Spanish, although many newer arrivals speak Italian, English, Portuguese, French and Japanese. Roman Catholicism is the official religion; freedom of worship is fully guaranteed and Jewish, Moslem and Protestant congregations of almost all denominations are present.

The governmental structure is similar to that of the U.S.A. with a strong executive branch and a bicameral congress elected for a 5-year period. Suffrage is extended to both men and women over 18 years of age and voting is mandatory for all citizens. The literacy rate is 85%, following a strong campaign during the last decade.

Petroleum is the basic item of Venezuela's economy and its chief export. It is followed by iron ore and certain agricultural products. Within the last decade, Venezuela has increased its consumer industries. As a member of OPEC, Venezuela has contributed to the new policies being established in the Latin American market of exported goods. Education is compulsory until the age 14. Secondary and technical schools and universities are maintained by the government and are free. A parallel private educational system exists which is closely regulated by the government.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministries

Ministerio de Educación Dirección de Educación Especial Fundación para el Desarrollo de Educación Especial Quinta Guaranao, Av. Las Acacias La Florida, Caracas	Ministry of Education Department of Special Education Foundation for Special Education Development
Ministerio de Sanidad y Asistencia Social Departamento de Higiene Mental Edificio Sur, Centro Simón Bolívar Caracas	Ministry of Health and Social Assistance Department of Mental Health

Planning

Comisión Permanente para la atención Retardo Mental	Presidential Commission

Av. Andrés Bello, Torre Oeste. Ofic. 92, Caracas

By Presidential decree, this permanent planning commission was created in 1975 for the care and attention of the mentally retarded. The commission has representatives from the different governmental and private agencies and is responsible for the planning, coordination and supervision of the work on mental retardation in Venezuela.

Others

Instituto Nacional de Psiquiatría Infantil (INAPSI) Ave. Las Acacias, No. 65 La Florida, Caracas	National Instituto of Child Psychiatry
Consejo Venezolano del Niño Edificio J. Beneficiencia San Martín, Caracas	Venezuelan Children's Council
Sección de Neurología, Departamento de Pediatría Hospital Clínico Universidad Central de Venezuela Ciudad Universitaria, Caracas	Neurological Section, Department of Pediatrics Clinical Hospital Central University of Venezuela

VOLUNTARY ORGANIZATIONS

Primarily concerned with mental retardation
Professional

Asociación Venezolana para el Estudio Científico de la Deficiencia Mental
(Venezuelan Association for the Scientific Study of Mental Deficiency)
c/o INAPSI
Av. Las Acacias, No. 65
La Florida, Caracas

Member of the International Association for the Scientific Study of Mental Deficiency.

Citizen

Asociación Venezolana de Padres y Amigos de Niños Excepcionales - AVEPANE
(Venezuelan Association of Parents and Friends of Exceptional Children)
6a Transversal de Altamira, No. 21-27, Caracas (Aptdo. de Correos 50583).

Founded in 1963, the Association provides programs for children and families in Caracas. Beginning with a day school for mildly retarded children, and later a school for moderately retarded children through AVESTRELLA (Asociación de Padres y Amigos de Niños con Retardo Mental Moderato), vocational training and a sheltered workshop is available. A university institute for the training of professionals in special education has also been a part of the program for the past five years. AVEPANE has convened many national conferences and regularly brings in consultants from abroad.

Parents' and friends' Associations have been organized in many other Venezuelan states, for example:

Asociación de Padres y Amigos de Niños Excepcionales - AZUPANE
(Zulia State Association of Parents and Friends of Exceptional Children)
Avenida 2 F No. 65-60, Aptdo. 1802, Colonia Creole
Maracaibo, Estado Zulia (Founded in 1968)

There have been associations active for at least ten years in the states of Bolivar, Carabobo, Falcon, Merida, Miranda, Monagas and Tachira.

Other national voluntary organizations which include mental retardation

Liga Venezolana de Higiene Mental Av. Olimpo. No. 56 San Antonio, Caracas	Venezuelan League of Mental Health
Asociación Venezolana para la Educación Especial Apartado 59045, Caracas	Venezuelan Association of Special Education Teachers
Asociación Nacional de Paralysis Cerebral - ANAPACE Terrazas de Santa Mónica Av. Simón Planas y Gil Fortoul Caracas	National Association for Cerebral Palsy
Federación de Instituciones Privadas de Asistencia al Niño - FIPAN	Federation of Private Child Welfare Institutions
Instituto Venezolano para el Desarrollo Integral del Niño INVEDIN 5 Ave. de los Palos Grandes Qta, Sta. Bárbara, Caracas	Venezuelan Institute for Child Development
Fundación para el Desarrollo Humano de la Persona con Retardo Mental FUNDEPREN El Caudil, Zea, Edo. Merida	Foundation for Human Development of Persons with Mental Retardation

PUBLICATIONS

AVEPANE makes available extensive informational publications and conference proceedings. INAPSI publishes a bulletin, "Niños".

BRIEF DESCRIPTIVE NOTES ON PROGRAM AREAS

Case Finding, Diagnosis and Assessment, Consultation to Parents - As yet limited services are available for parents of very young children. Regional diagnostic centers, created by the Department of Special Education, provide diagnosis, orientation and parent guidance, which is also one of the main concerns of the various parent associations throughout the country. Traditionally, mental health centers carried out certain diagnostic functions as did the neurological pediatric services in the university hospitals. INVEDIN has been especially interested in problems of early stimulation and work with parents.

Education - Educational services for retarded children were first provided by private groups. By 1974, there were about 25 privately owned special schools and 33 under various government auspices, serving a very small percentage of the total number of children needing special education. A problem in Venezuela, as in many countries, is the differentiation between children who are mentally retarded and children who are functioning as retarded because of social and economic deprivation.

Work Training and Employment - Since 1969, AVEPANE has been operating a vocational training and sheltered workshop program "Talleres Aveluz Dr. Alberto Mateo Alonso."

Residential Services - Children of school age whose parents are insured under the social security system, benefit from a limited assistance. Private associations offer scholarships for treatment, education and vocational training, obtained through donations.

Personnel Training - Specialized training programs, primarily for teachers and psychologists, have been carried out by AVEPANE, INAPSI, and by the Instituto de Mejoramiento del Magisterio (Teachers' College) depending on the Ministry of Education. In cooperation with some North American universities, AVEPANE has developed more extensive training programs and for the past five years has provided university accredited courses for teachers.

OTHER INFORMATION FOR VISITORS

Official visitors sent by foreign governments may have their visits arranged through the Ministry of Foreign Relations and the Ministry of Education.

Official visitors from non-governmental associations will be welcomed by AVEPANE, which can set up a program and coordinate their stay in Venezuela.

School Holidays - from the middle of July through the middle of September; Christmas, Holy Week.

ZAMBIA

The Republic of Zambia is located in the high plateau country of south central Africa. Its population of 7 million (1987 estimate) live in 9 provinces.

Lusaka, the capital city, has an estimated 700,000 people. Zambia (formerly Northern Rhodesia) became an independent nation in 1964. It is a member of the British Commonwealth; languages spoken are English and the local dialects.

GOVERNMENTAL AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of General Education and Culture

Inspectorate of Special Education
P.O. Box 50093, Lusaka

Special Education Division
Curriculum Development Centre
P.O. Box 50097, Lusaka

Ministry of Health

Psychiatrist-in-Charge, F Ward (for children)
Chainama Hills Hospital
P.O. Box 30043, Lusaka

Ministry of Labour and Social Services

The Commissioner for the Handicapped
Department of Social Development
P.O. Box 32186, Lusaka

National Planning and Coordination:

The National Mental Health
Coordinating Committee
c/o The Permanent Secretary/
Director of Medical Services
Ministry of Health
P.O. Box 30205, Lusaka

The Interministerial Steering
Committee on Special Education
c/o The Chief Inspector of Schools
Ministry of General Education and
Culture
P.O. Box 50093, Lusaka

The National Committee on Rehabilitation
c/o The Commissioner for the Handicapped
Department of Social Development

VOLUNTARY ORGANIZATIONS

The Zambia Association for Children and Adults
with Learning Disabilities (ZACALD)
The Executive Secretary
P.O. Box 320178, Lusaka

ZACALD was registered in 1981 as a voluntary organization "established primarily to promote education, training, rehabilitation and general welfare of mentally retarded persons in Zambia and to assist their families to meet their special needs" (revised constitution 1986). The Association defines children and adults with learning disabilities as "persons who because of limited intellectual capacity experience significant difficulties and therefore need special help over and above the existing provisions in the community". During the period 1984-86 ZACALD has expanded its activities considerably with the formation of local branches within the capital city of Lusaka and a few other towns (Kabwe, Mazabuka, Ndola). These branches are principally concerned with raising funds to improve and/or expand existing educational services and opportunities for work training. Most of the members of the Association are parents or teachers of children with mental retardation. It became a member of the International League of Societies for Persons with Mental Handicap in 1982.

The Mental Health Association of Zambia
The Executive Secretary
P.O. Box 50614, Lusaka

RESEARCH

Educational Research Bureau
The Director
University of Zambia
P.O. Box 32379, Lusaka

Institute for African Studies
The Director (Attn. Mr. D. Nabuzoka)
University of Zambia
P.O. Box 30900, Lusaka

Psychology Department
School of Humanities and Social Sciences
University of Zambia
P.O. Box 32379, Lusaka

BRIEF DESCRIPTIVE NOTES ON PROGRAMS

Case Finding, Diagnosis and Assessment, Consultation to Parents - A major outreach exercise in case finding was undertaken in 1982-83 under the heading of a National Campaign to Reach Disabled Children. Multi-sectoral teams of 3 with short-term training in assessment were deployed for 7 months in all 57 Districts to establish registers of children aged 5-15 with severe disabilities, including mental retardation (designated 'severe learning difficulties'). Very few of those diagnoses have been reviewed by professional teams established to follow up the Campaign and the situation has reverted to the pre-existing status quo in which contacts with the few existing services are principally based on referral of children by their parents to the hospital or of adults by the police.

Community Based Rehabilitation - Two rural District Rehabilitation Teams have been in place since 1983 (Katete, Zambezi) with a mandate to conduct home visits to advise on community-based rehabilitation (CBR) activities for children identified during the campaign, but their work has been severely constrained by shortage of transport. Plans to replicate and extend this type of service for case-finding and consultation to parents in other Districts have been formulated at a national workshop on CBR in November 1985, and are gradually being operationalised through a series of Provincial Workshops. Responsibility for the implementation of this programme is shared between the 3 Ministries of Health, General Education and Culture, Labour and Social Services.

Education - Before 1971, education for handicapped children was organized and provided by voluntary agencies, mainly missionary agencies. Because the government was not involved, there was no teacher training programme for those interested in teaching children with handicaps. Even after the Ministry of Education assumed responsibility in 1971 for education of handicapped children, only a very small number of mentally handicapped children have benefitted from those services.

Access to mainstream schooling is mainly confined (by unofficial consensus between parents and teachers) to children with mild degrees of mental retardation. However from 1984, the government's special education programme for the mentally handicapped has substantially increased. There are now a number of integrated units consisting of specialized teachers with separate classrooms for children with moderate or severe mental retardation on the premises of some primary schools. Currently, there are seventeen (17) such units and one school, although most of them are found in urban areas and only one in a rural area. Government plans include the goal of establishing one such unit in each of the 57 Districts, but it will take some time for this goal to be achieved.

There are two day care centres that are attached to hospitals. The largest of the two is on the premises of the national psychiatric hospital (Chainama Hills, Lusaka), and it serves about fifty (50) children with moderate to severe mental retardation. The other day centre is fairly new and serves only 20 children.

Work Training and Employment - A small number of persons with mental retardation find places in the farm settlements administered by the Zambia Council for the Handicapped, a parastatal body closely linked to the Ministry of Labour and Social Services. Many more participate actively in the subsistence economy of rural areas, without any formal certification or any special support from public services. ZACALD is in the process of developing an integrated scheme for vocational training and sheltered employment of persons with mental retardation in the field of textile production. A plot of land has been allocated to the project in Lusaka and resource personnel are in training under the auspices of the government's Department of Technical Education and Vocational Training.

A pilot project on pre-vocational training in weaving and in carpentry has been mounted in 1986 within one of the primary school units in Lusaka for children with mental retardation, with the financial support of ZACALD.

Medical Care - Specialized medical care is delivered to a limited number of persons with mental retardation through the government's psychiatric services which include, in addition to the national psychiatric hospital, a network of specially trained clinical officers posted in all Districts. In addition certain types of medication (e.g. anti-epileptic drugs) are dispensed to patients through the ordinary local health centres.

Residential Care - A small number of persons with severe mental retardation reside at the national psychiatric hospital. The policy is, however, to discharge such patients whenever possible after a short stay and to enlist the cooperation of the Government's Department of Social Development in their reintegration and acceptance within their home communities. Government resources for monitoring the progress of such community-based rehabilitation are presently extremely limited, but there are plans for their expansion (see section above on CBR).

Financial Assistance - The Government's Department of Social Development provides grants in cash and in-kind (food and clothing) to a small number of persons designated as 'indigent,' including some persons with mental retardation. No specific provision exists for direct public financial assistance for persons with mental retardation or their families, but the Ministry of General Education and Culture has a policy of exempting such families from various levies in respect of educational services.

Research - Various sections of the University of Zambia have from time to time undertaken research in this field: Educational Research Bureau; Institute for African Studies (Community and Occupational Health Research Programme); School of Humanities and Social Sciences (Psychology Department); School of Medicine (Psychiatric Department).

Personnel Training and Development - The government is focusing attention on the training of teachers for mentally retarded children. There is one college in the country that provides in-service training for teachers of the handicapped. The first group of teachers specializing in education for the mentally handicapped was trained in 1981 and by the end of 1985 fifty six (56) teachers had been trained and redeployed in units for children with mental retardation.

The government has also embarked on the development of curriculum for special education in the country. A Department of Special Education was opened at the National Curriculum Development Centre in 1982. This department's team includes a specialist in the area of mental retardation. The plans for this Department are to produce supplementary syllabi, supplementary teachers handbooks, and teaching/learning aids for pupils and teachers. The Department also plans to conduct workshops for teachers.

The principal programme involved in personnel training is the Lusaka College for Teachers of the Handicapped.

Planning - The principal committees responsible for planning in this field are: The Inter-Ministerial Steering Committee on Special Education, The National Mental Health Coordinating Committee, and The National Committee on Rehabilitation.

OTHER INFORMATION FOR VISITORS

Specific inquiries may be directed to a relevant government agency or to the Zambia Association for Children and Adults with Learning Disabilities.

School Holidays - are normally about one month in duration and occur in December-January, April-May, August-September.

ZIMBABWE

Located in south central Africa, the Republic of Zimbabwe is bordered by Zambia, Botswana, South Africa and Mozambique. A prime minister and parliament administer the country's eight provinces where over nine million people reside.

Formerly the self-governing British colony of Southern Rhodesia, the country suffered more than a decade of severe disturbance before establishment of majority rule and independence in 1980; the largest cities are Harare (formerly Salisbury) and Bulawayo.

GOVERNMENT AGENCIES WITH MENTAL RETARDATION RESPONSIBILITY

Ministry of Health - Responsible for the care of the profoundly retarded

Deputy Secretary, Mental Health and Psychiatric Services
P.O. Box 8204, Causeway

Ministry of Education - Responsible for special education for the mildly retarded

Chief Educational Psychologist
P.O. Box 8022, Causeway

Ministry of Labour, Manpower Planning and Social Welfare - Responsible for payment of salary and per capita grants to non-governmental organizations in the rehabilitation field.

Director of Social Services
P.O. Box 8078, Causeway

VOLUNTARY ORGANIZATIONS

With Primary Concern for the Mentally Handicapped

Zimcare Trust
P.O. Box BE 90
Belvedere, Harare

Zimcare Trust was formed on October 1, 1981 as the result of a merger between Hopelands Trust, SASCAM (Society for the Care of African Mentally Handicapped) and two smaller societies and is now the only organization in the field of the mentally handicapped. It caters for 950 children and adults of all races at its 15 special schools and training workshops throughout the country, as well as 300 children in four pilot areas under the Rural (Home-Based Education) Programme which has recently been evaluated by independent experts and is to be extended country-wide as soon as funds permit. Zimcare Trust is looked upon by Government as the only agency in the field and all inquiries received by them are referred to it. Member of the ILSMH since 1986.

Other which Include some Concern

St. Giles Medical Rehabilitation Centre
P.O. Box A 224
Avondale, Harare

Zimbabwe Red Cross Society
P.O. Box 1406, Harare

The Toy Library for Handicapped Children
P.O. Box HG. 467
Highlands, Harare

Zimbabwe Down's Children Association
42 Woodgate
Northwood, Harare

Coordinating Organization

National Association of Societies for
the Care of the Handicapped (NASCOH)
P.O. Box UA 504
Union Avenue, Harare

The official coordinating body for voluntary organizations (33) working with and for people with disabilities in Zimbabwe. Member of Rehabilitation International.

PUBLICATIONS

Information on educational services in Zimbabwe has been published in

> Special Education for East and Southern Africa (UNESCO Bulletin)
> P.O. Box 30592
> Nairobi, Kenya

BRIEF DESCRIPTIVE NOTES ON PROGRAMME AREAS

Diagnosis and Assessment - Zimcare Trust is involved in screening of children/adults referred by doctors, schools, Schools Psychological Services or other sources.

Education - The Trust provides pre-school education, education in 12 special schools throughout the country, a Rural (Home-Based Education) Programme in Mashonaland Province (to be extended country-wide in near future).

Vocational Training and Sheltered Employment - in 3 Zimcare Trust workshops and its farm.

Medical Care - for the profoundly handicapped is given at the Government Operated Home.

Residential Care - is provided at 3 of the Trust's Centres.

Financial Assistance - Teachers' salaries are funded by the Ministry of Education and a per capita grant for each child or adult at an institution is paid monthly by the Department of Social Services, coupled with a yearly salary grant for certain instructors and other qualified staff. The balance of finance required is obtained by fund raising or donations.

Recreation - Residential centre houseparents provide recreation, assisted by Service Clubs and Zimcare Trust Committee members. Sport activities are provided at all schools.

Research - Mini-evaluations on:

a) Direct Instruction Teaching Programmes
b) Video Training Pachages for the Rural (Home-Based Education) Programs, and training of care staff.

Personnel Training - In-service training of teachers and care staff, training of parents and helpers on Home-Based Education Programme.

Planning - A National Disability Survey of Zimbabwe was undertaken in 1982 by the Department of Social Services in association with UNICEF. This survey estimated there were 27,000 people with mental handicaps but this estimate is probably low. A plan of action as a follow-up to the Survey is being developed.

OTHER INFORMATION FOR VISITORS

Further information may be requested from the Zimcare Trust or NASCOH.

School Holidays - Approximately 12th April to 12th May, 9th August to 8th September, 6th December to 13th January.

TIPS FOR TRAVELERS

Suggestions on Planning Trips to Other Countries

With the tremendous increase in international travel, many organizations and agencies may be burdened by the large number of visitors from abroad. Many hours of valuable staff time are involved in receiving these visitors. You will quickly see that it is not only your obligation towards your prospective host but also in your own interest to prepare your trip carefully so that your visit will receive appropriate attention. Here are a few suggestions:

1. Prepare a brief, one page statement which gives your own professional background, your present activities, including your full title, the name of the agency or organization with which are affiliated, and your full address. Outline briefly the particular program area in which you are interested; indicate also whether you would like to meet particular staff members.

2. Enclose this statement in your correspondence preparatory to your trip and carry enough copies with you so that you can leave one with the person who receives you at each of the programs you visit. Furnishing this kind of information will assure your prospective host that your interest is genuine and warrants attention. It also will help in planning time most effectively and involving those staff members who are best able to assist you, or who may be best able to act as interpreter for you.

3. Be as specific as possible regarding the length of time you will have available for your visit.

4. Allow adequate time for your local travel arrangements so that your host is not kept waiting. It is easy to forget how much one can get slowed down in finding the way in unaccustomed surroundings.

5. Frequently travellers try to crowd too much into their schedules. Be sure to give yourself time to absorb what you have seen, and by all means, keep a daily record of facts, figures and comments.

6. Final precautions: DO check whether the countries you plan to visit require visas; if so, do not wait until the last minute to obtain one. Then: take twice the money and half the clothes you think you will need (advice from well-seasoned travellers).

BON VOYAGE!

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U.S DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF HUMAN DEVELOPMENT SERVICES
PRESIDENT'S COMMITTEE ON MENTAL RETARDATION
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